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STATEWIDE HUMAN SERVICES INFORMATION & REFERRAL DIRECTORY

Council of Community Services, Information & Referral Services

Contact: Sandra King, Director
Information & Referral Center
P.O. Box 598
Roanoke, VA 24004
502 Campbell Avenue, S.W.
Roanoke, Virginia 24016
Ph: (540) 985-0131 Ext. 3600
Fax: (540) 982-2935
TTY/TDD: (540) 982-2345 or 1-800-230-6977
E-mail: ccsir@roanoke.infi.net

Southwestern Region

Counties Served: Alleghany, Bland, Botetourt, Buchanan, Carroll, Craig, Dickerson, Floyd, Giles, Grayson, Lee, Montgomery, Roanoke, Russell, Scott, Smyth, Tazewell, Washington, Wise, Wythe
Cities Served: Bristol, Covington, Galax, Norton, Pulaski, Radford, Salem

Family Resource & Referral Center

Contact: Beth Baber, Director
934 North Augusta Street
Staunton, Virginia 24401
Ph: (540) 245-5899 Fax: (540) 885-2185
E-mail: bab410@northern.dss.state.va.us

Northwestern Region

Counties Served: Augusta, Albemarle, Bath, Highland, Rockbridge, Caroline, Clarke, Culpeper, Fauquier, Frederick, Fluvanna, Greene, King George, Louisa, Madison, Nelson, Orange, Page, Rappahannock, Rockingham, Shenandoah, Spotsylvania, Stafford, Warren
Cities Served: Buena Vista, Charlottesville, Fredericksburg, Harrisonburg, Lexington, Staunton, Waynesboro, Winchester

Northern Virginia Regional Commission

Contact: Tylee Smith, Director
Information & Referral Program
7535 Little River Turnpike, Suite 100
Annandale, Virginia 22003-2937
Ph: (703) 642-4638 Fax: (703) 642-5077
Alexandria TTY/TDD: 1-800-828-1140
Arlington TTY/TDD: (703) 228-1398
Fairfax TTY/TDD: (703) 803-7914
Loudoun TTY/TDD: 1-800-828-1140
Prince William TTY/TDD: 1-800-828-1140
E-mail: tylee@novaregion.org

Northern Virginia Region

Counties Served: Arlington, Fairfax, Prince William, Loudoun
Cities Served: Alexandria, Fairfax City, Falls Church, Manassas, Manassas Park

The Planning Council

Contact: George Harden, Vice President
Information Services Division
130 West Plume Street
Norfolk, Virginia 23510
Ph: (757) 622-9268 Ext. 3040
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E-mail: gharden@theplanningcouncil.org

Tidewater Virginia Region

Counties Served: Essex, King & Queen, King William, James City, Southampton, Isle of Wight, Northampton, Accomac, York, Lancaster, Middlesex, Northumberland, Richmond, Westmoreland, Gloucester, Tappahanock, Mathews
Cities Served: Chesapeake, Franklin, Hampton, Newport News, Norfolk, Poquoson, Portsmouth, Suffolk, Virginia Beach, Williamsburg

United Way of Central Virginia

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Community Impact
1010 Miller Park Square
Lynchburg, Virginia 24501
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Fax: (434) 847-8753
TTY/TDD: (434) 847-8335
E-mail: joan.phelps@unitedwaycv.org

Central Virginia Region

Counties Served: Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania
Cities Served: Danville, Lynchburg, Martinsville, Bedford, Roanoke

United Way Services – Richmond

Contact: Patricia Couto, Director
Information & Referral Center
P.O. Box 12209
Richmond, VA 23241
224 East Broad Street
Richmond, Virginia 23219
Ph: (804) 225-7916 Fax: (804) 225-7913
TTY/TDD: 1-800-435-8490
E-mail: coutop@yourunitedway.org

Richmond/Southside Virginia Region

Counties Served: Brunswick, Buckingham, Amelia, Charlotte, Cumberland, Charles City, Chesterfield, Dinwiddie, Emporia, Goochland, Greenville, Halifax, Hanover, Henrico, Lunenburg, Mecklenburg, New Kent, Nottoway, Powhatan, Prince Edward, Prince George, Surry, Sussex
Cities Served: Colonial Heights, Hopewell, Petersburg, Richmond, South Boston

**STATEWIDE HUMAN SERVICES
INFORMATION & REFERRAL**

STAFF DIRECTORY

DIVISION OF COMMUNICATIONS

MARCELLA WILLIAMSON, DIRECTOR

9TH FLOOR, ROOM 940

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PAGER: (804) 759-8166

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STATEWIDE I&R PROGRAM

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**INFORMATION & REFERRAL PARTNER OFFICES
FAMILY RESOURCE & REFERRAL CENTER**

The Piedmont United Way

118 East Piedmont Street

P.O. Box 398

Culpeper, VA 22701

(540) 825-7615 or 1-800-351-0242

The Rappahannock United Way

3331 Shannon Airport Circle

Fredericksburg, VA 22418

(540) 371-5268 or 1-877-435-7510

The United Way Thomas Jefferson Area

806 East High Street

Charlottesville, VA 22902

(804) 972-1703

**STATEWIDE INFORMATION & REFERRAL PARTNER OFFICES
NORTHERN VIRGINIA REGIONAL COMMISSION**

CHAIR

Linda McAllister, Supervisor
Crisis Assistance and Referral
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3033 Wilson Boulevard, Suite 300 B
Arlington, VA 22201-3843

Telephone: (703) 228-1306
FAX: (703) 228-1013
e-mail: Imcall@co.arlington.va.us

Centers Receiving Statewide I&R Telephone Calls
800-230-6977

ALEXANDRIA

Linda Cotton
Aging and Adult Services
Department of Human Services
2525 Mount Vernon Avenue
Alexandria, VA 22301
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Center's Telephone: (703) 836-0900
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Center's Telephone: (703) 222-0880
FAX: (703) 324-3839
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ARLINGTON COUNTY

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Crisis Assistance and Referral
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FAIRFAX COUNTY

Elizabeth Way
Resource Info Management
6245 Leesburg Pike, Suite 301
Falls Church, VA 22044
Telephone: (703) 533-5718

NORTHERN VIRGINIA REGIONAL COMMISSION

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LOUDOUN COUNTY

Michele Ransom, Supervisor
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Department of Social Services
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Leesburg, VA 20176
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Center's Telephone: (703) 771-5400
FAX: (703) 771-5214
e-mail: mransom@co.loudoun.va.us

PRINCE WILLIAM COUNTY

Tom Meagher, Project Leader
Prince William Dept. of Social Services
7987 Ashton Avenue, Suite 200
Manassas, VA 20109
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Center's Telephone: (703) 792-7500
FAX: (703) 792-7363
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**STATEWIDE INFORMATION & REFERRAL PARTNER OFFICES
UNITED WAY OF CENTRAL VIRGINIA**

Bedford Community Resource Center
403 Otey Street
Suite B4
Bedford, Virginia 24523
(540) 587-8990

Crisis Line of Central Virginia
P O Box 3074
Lynchburg, Virginia 24503
Intake Number: (804) 947-4357
(804) 947-5921

Danville Contact Crisis Line
P O Box 41
Danville, Virginia 24543
(804) 793-4940

Martinsville Crisis Line
407 E. Church Street
Martinsville, Virginia 24114
(540) 632-6133

HEALTH & HUMAN RESOURCE CONTACT LIST

Department for the Aging

Center for Elder Rights

Contact: Ms. Janet Riddick, Director

1600 Forest Avenue

Richmond, Virginia 23229

Phone: (804) 662-7050

Fax: 662-9354

E-Mail – ejriddick@vdh.state.va.us

Department of Rehabilitative Services

Contact: Ms. Elizabeth Smith

Policy & Planning Director

8004 Franklin Farm Drive

Richmond, Virginia 23288-0300

Phone: (804) 662-7071

Fax: 662-7644

E-Mail – smithee@drs.state.va.us

Department for the Deaf and Hard of Hearing

Contact: Mr. Clayton Bowen, Business Manager

Leslie Hutcheson, Policy & Planning Manager

1602 Rolling Hills Drive

Richmond, Virginia 23229-5012

Phone: (804) 662-9704

Fax: 662-9718

E-Mail – hutche1g@ddhh.state.va.us

Department of Mental Health, Mental Retardation & Substance Abuse Services

Contact: Ms. Bernice Morgan

Consumer Quality Care Line Coordinator

1220 Banks Street

Richmond, Virginia 23219

Phone: (804) 371-7564

Fax: 692-0077

E-Mail – bmorgan@DMHMRSES.state.va.us

Department for the Visually Handicapped

Contact: Ms. Jane B. Ward

Program Director for Rehabilitation Teaching & Independent Living Services

397 Azalea Avenue

Richmond, Virginia 23227

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Fax: 371-3390

E-Mail – wardjb@dvh.sate.va.us

Department of Health

Contact: Ms. Elaine Martin

Director of Community Services

P.O. Box 2448

Room 112

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Fax: 225-3517

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HEALTH & HUMAN RESOURCE CONTACT LIST

Page 2

Department of Medical Assistance Services

Contact: Ms. Bernadette Clark, FOIA Coordinator

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Richmond, Virginia 23219

Phone (804) 371-6391

Fax: 371-4981 E-Mail – bclark@dmass.state.va.us

Chris Schroeder Phone: (804) 371-0552 E-Mail – schroeder@dmass.state.va.us

Department of Social Services

Contact:

730 East Broad Street, 9th Floor

Richmond, Virginia 23219-1849

Phone: (804) 692-1903 Fax: 692-1949 E-Mail - www.dss.state.va.us

Department of Health Professions

Contact: Ms. Pat Wallace

Administrative Staff Assistant

6606 West Broad Street, 4th Floor

Richmond, Virginia 23230

Phone: (804) 662-9919 Fax: 662-9114 E-Mail – pwallace@dhp.state.va.us

Council on Indians

Contact: Ms. Reeve G. Tilley, Chairman

805 East Broad Street

Richmond, Virginia 23219

Phone: (804) 786-3746 Fax: 786-0053 E-Mail – rtilley@dcjs.state.va.us

Board for People with Disabilities

Contact: Mr. Brian Parsons, Director

202 North 9th Street

Richmond, Virginia 23219

Phone: (804) 786-0016 Fax: 786-1118 E-Mail – parsonsbs@vbpd.state.va.us

Donne Bowden Phone: (804) 786-9376 E-Mail – bowdendk@vbpd.state.va.us

Statewide Human Services Information and Referral Code Of Virginia

§ 63.1-314.1

Establishment of system

There shall be created a statewide human services information and referral system designed to:

1. Collect and maintain accurate and complete resource data on a statewide basis;
2. Link citizens needing human services with appropriate community resources to satisfy those needs;
3. Assist in planning for human services delivery at the local, regional and state levels; and
4. Provide information to assist decision-makers in allocating financial and other resources to respond to state and local human service priorities.

§ 63.1-314.2

Creation of Council

There is hereby created in the executive branch of the state government the Human Services Information and Referral Advisory Council, hereinafter referred to as the "Council."

§ 63.1-314.3

Members of Council; terms; vacancies; chairman

- A. The Council shall consist of no more than twenty-five members, to be appointed by the Governor as follows:
Three citizens at large, one of whom is a consumer of human services and one of whom has a disability; two representatives from business or industry or both; two representatives of local government representing one rural and one urban locality; one representative of United Way of Virginia; one representative from the Virginia Cooperative Extension Services; one representative from The Library of Virginia; one representative of the armed services residing in Virginia; one representative from the information and referral regional providers; one labor representative; one representative from each of the six information and referral centers' regional boards and one representative from the Virginia Association of Community Action Agencies.
- B. Members of the Council shall be appointed for four-year terms except that persons appointed to fill vacancies shall be appointed for the unexpired term.
- C. Persons appointed to the Council shall be knowledgeable about the development and implementation of information and referral programs and the services to be provided by the program.
- D. The chairman of the Council shall be appointed by the Governor from its membership.

§ 63.1-314.4

Duties of Council

- A. The Council shall recommend standards and policies for the development and implementation of a statewide human services information and referral system to provide information on or referral to appropriate public and private, state, local and regional agencies. Such standards and policies shall include but need not be limited to those related to:
 - 1. The scope of information and referral services to be provided by the system;
 - 2. Manner of regionalization and localization of information and referral, including selection of regional providers and boundaries of each region with consideration given existing information and referral programs;
 - 3. Resource data collection, indexing and maintenance;
 - 4. Data processing requirements;
 - 5. Publicizing of services;
 - 6. Sharing of resource information with state agencies and their affiliates; and
 - 7. Costs and financing.
- B. The Council shall review the plans for the design and implementation of the information and referral program developed by the Department of Social Services.
- C. The Council shall advise and make recommendations to the Commissioner of the Department of Social Services on matters relating to the operation and procedures of the information and referral system.
- D. The Council shall make recommendations to the Secretary of Health and Human Resources and to the Commissioner regarding regulations governing the operations of the system.
- E. The Council shall review the program developed by the Department for monitoring and assessing the performance of the information and referral program.
- F. The Council shall submit a biennial report to the Governor evaluating the effectiveness of the information and referral program.
- G. The Council shall meet at least once each year, no later than October 1 of each year.

The Department of Social Services shall assume administrative responsibilities for the statewide system in conformance with standards and policies recommended by the Council. In this capacity, the Department shall establish an office to:

- 1. Provide staff support to the Council;
- 2. Develop a plan for the design and implementation of a statewide human services information and referral program conforming to the standards and policies recommended by the Council and submit the plan to the Council for review;

§ 63.1-314.5

Duties of Department

3. Coordinate and supervise the implementation and operation of the information and referral program;
4. Coordinate funding for the system;
5. Select regional providers of information and referral services;
6. Supervise coordination of information management among information and referral regions across the Commonwealth;
7. Encourage effective relationships between the system and state and local agencies and public and private organizations;
8. Develop and implement a statewide publicity effort;
9. Provide training, technical assistance, research, and consultation for regional and local information and referral centers, and to localities interested in developing information and referral services;
10. Determine a core level of services to be funded from state government resources;
11. Coordinate standardization of resource data collection, maintenance and dissemination;
12. Stimulate and encourage the availability of statewide information and referral services; and
13. Develop and implement a program for monitoring and assessing the performance and success of the information and referral program and present an annual report to the Council evaluating the effectiveness of the system.

§ 63.1-314.6

Regional providers; duties

There shall be established a regional system of providers of information and referral services. The Council shall define the boundaries of the regions, and the Department shall select the regional providers according to standards and policies established by the Council.

The regional providers shall:

1. Collect, maintain and disseminate resource data;
2. Provide citizen access to information about resources throughout the Commonwealth;
3. Assist in planning functions by providing selected data to the Department on a regular basis;
4. Provide data to public and private agencies other than the Department on a contractual basis;
5. Cooperate with the state administering agency;
6. Seek funds from available sources;
7. Maintain effective relationships between the system and state and local agencies and public and private organizations; and
8. When feasible and appropriate and within the limits of available funds, establish satellite offices or develop cooperative agreements with local information and referral groups and resource and referral groups which can assist the regional providers in performing their duties and responsibilities.

§ 63.1-314.7

Repealed by Acts 1990, c. 915.

§ 63.1-314.8.

Technical Assistance Committee created; duties; membership

- A. There is hereby created a Technical Assistance Committee, which shall provide technical and support services on the operations of the information and referral system as the Council may deem appropriate and shall advise the Council in performing its powers and duties.
- B. The membership of the Technical Assistance Committee shall include but not be limited to:
 - 1. Two directors of local departments of public welfare or social services, one serving a rural and one an urban locality, to be appointed by the Commissioner of Social Services; and
 - 2. The Commissioners or Directors, or their designees, of the Department of Medical Assistance Services; Department of Health; Department of Mental Health, Mental Retardation and Substance Abuse Services; Department of Rehabilitative Services; Department for the Aging; Department for the Blind and Vision Impaired; Department for Rights of Virginians With Disabilities; Department of Information Technology; Department for the Deaf and Hard-of-Hearing; Department of Health Professions; Department of Corrections; Department of Education; Department of Juvenile Justice; and the Virginia Employment Commission.

STATEWIDE INFORMATION & REFERRAL MEETING SCHEDULE - 2002

January 10	Virginia Department of Social Services
February 7	Conference Call
March 7	United Way Services - Richmond 224 East Broad Street Richmond, VA (804) 225-7916
April 4	Conference Call
May 2	Virginia Department of Social Services Lower Level Training Room 2
June 14	Conference Call
July 11	Virginia Department of Social Services
August 1	Conference Call
September 12	Virginia Department of Social Services
October 3	Conference Call
November 7	Virginia Department of Social Services
December 5	Conference Call

**NOTE: All meetings held at the Virginia Department of Social Services,
730 East Broad Street, 8th Floor Conference Room.**

05-03-02

STANDARD DUE DATES

AUDIT REPORTS

Three copies due to the Department of Social Services 30 days after receipt of the report by the institution or agency.

QUARTERLY REPORTS

Due 30 days following the end of the last month in each quarter.

INFORMATION & REFERRAL CONTRACTOR'S MEETING

Held the first Thursday of each month at the Virginia Department of Social Services unless otherwise specified. A conference call is held every other month.

INVOICES

Due within 30 calendar days after the close of the invoice period.

CORE LEVELS OF I&R SERVICE DELIVERY

INFORMATION AND REFERRAL

Information and referral services help individuals, families and communities identify, understand and effectively use the programs that compromise the human service delivery system. Trained I&R specialists help people understand their problems and make informed decisions about possible solutions. They may actively link people with a service provider, advocate on behalf of those who need special support, and reinforce the individual's capacity for self-reliance and self-determination through education, affirmation, collaborative planning and problem solving. They also provide follow-up to ensure that individuals' needs were met and that the I&R service provided was satisfactory. I&R services are a vital link bringing people and services together.

According to standards set forth in the *Code of Virginia* I&R Contractors are responsible for collection, maintenance, and dissemination of information about human service resources in the Commonwealth of Virginia.

DATA COLLECTION

I&R Contractors are responsible for the collection of resource information on human services in the Commonwealth. A standardized data collection survey instrument (Attachment) has been developed and is utilized by each regional contractor to collect information about human services. Each contractor is charged with securing information on resources in their identified area. Data collection should include the following:

1. Survey all human service agencies/programs in region
2. Adhere to the inclusion/exclusion policy for resources to be listed on database
3. Resource information on services shall include:
 - Agency-name, address, telephone numbers, person in charge, agency type, and a listing of all programs
 - Program- Name, address, telephone numbers, person in charge, email and internet addresses, hours & days if service, description of service, eligibility, fees, intake procedures, languages spoken, service areas, and accessibility
4. Human service resource information must be indexed according to AIRS info line taxonomy
5. Information collected on a human service must be verified by an authorized employee of the agency/program
6. Information can be collected through any medium (written e-mail, faxed, web site, etc.)

DATA MAINTENANCE

Once data has been collected on human service resources, it is imperative that information is continuously updated for accuracy.

CORE LEVEL OF I&R SERVICE DELIVERY

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1. Human service information shall be updated in a formal manner once a year
2. Updated information shall be confirmed by an authorized employee of the affected agency/program
3. Human service resource information shall be updated informally on an ongoing basis as new information is available. Changes shall be confirmed by an authorized person from the affected agency or program

DATA DISSEMINATION

Each regional I&R Contractor is responsible for dissemination of collected human service information. The following are components of I&R service dissemination:

1. Provide citizens access to information about resources in the Commonwealth
2. Refer citizens to available resources that address their needs
3. Provide human service information to service providers
4. Operate a service delivery structure that serves their region. Service hours for I&R shall be 8:30AM-7:00PM Monday through Friday
5. Provide information on human services resources by telephone, walk-in, appointment, mail, fax, email or internet
6. Establish partnerships, when feasible, to maximize dissemination of I&R services
7. Develop products that expand access to human service resources. These may include directories, quick guides, information disks pamphlets, and additional web access
8. Provide optimal after-hour service delivery. Options include use of answering machines, answering services or use of an after hours service provider like a crisis line
9. Submit reports regarding service delivery to contracting organizations and other decision makers as appropriate
10. Conduct follow-up on 3% of eligible I&R calls resulting in referral to another service provider

Virginia Statewide Human Services I&R System

Database Inclusion/Exclusion Criteria

The following criteria of the Virginia Statewide Information and Referral System, follows as closely as possible the standard practices set forth by AIRS (Alliance of Information & Referral Systems, Inc.)

Inclusions

1. The agency/service provider must provide a human service. Human Services are defined as:

The activities of human services professionals which help people to become more self-sufficient, sustain independence, strengthen family relationships, support personal and social development and ensure the well-being of individuals, families, groups and communities. Specific human services include ensuring that people have access to adequate food, shelter, clothing and transportation; financial resources to meet their needs; consumer education and decision support; criminal justice or legal services; education and employment; health and mental health care including substance abuse services; and environmental protection; both routinely and in times of disaster or other emergencies. Human services also facilitate the capabilities of people to care for children or other dependents; ensure that protective services are available to those who are vulnerable; provide for the support of older adults and people with disabilities; offer social, faith-based, and leisure time activities; provide for the cultural enrichment of the community; and ensure that people have the information they need to fully participate in community life.

NOTE: From the Alliance of Information and Referral Systems (AIRS) as adapted from the definition of "Social Work" in the Dictionary of Social Work published by the National Association of Social Workers.

2. The agency/service provider must serve the residents of the I&R region.
3. The agency/service provider must have been in existence more than six months in order to indicate a degree of permanence, unless either of the following is the case:
 - The agency/service provider is an affiliate of an established service provider with multiple locations or
 - The agency/service provider is the result of a community or coalition planning process.
4. The agency/service provider may be either government or non-profit. For-profit organizations and unincorporated groups meeting critical human service needs shall also be included.
 - In adding agencies/service providers to the database, priority shall be given to scarce, free or low-cost resources.

5. Services consistently and systematically tracked by another organization that gives referrals to the public may be included or excluded at the option of the regional I&R center (i.e. mental health practitioners in areas with a comprehensive mental health referral service). The other referring agency shall be included in the regional I&R database, whether or not the direct service providers are listed.

Examples of inclusions

- Other local agencies providing I&R, including specialized I&R
- Essential services (food, shelter, etc.)
- Government agencies (local, state, and federal)
- Agencies located in bordering states if they serve the residents of the I&R region
- Advocacy organizations
- Self-help support groups. Since some support groups rely on members who volunteer as contact persons, it can be difficult to keep listings current. The contact person may move, change telephone numbers, or simply drop out of the organization. Therefore, each Regional I&R Center shall have the option to track state, regional, or national headquarters instead of local groups
- State and national parks located in your I&R region only

Exclusions

1. Organizations which discriminate based on race, religion or similar factors
2. Organizations engaged in fraudulent or illegal activities
3. Agencies which misrepresent their services in any way, including non-delivery of listed services
4. Individual practitioners (i.e. physicians or psychiatrists in an private practice)
5. Organizations and/or professionals which are not licensed (in areas where licensing standards exist)
6. Political and issue-oriented groups (unless the alternate viewpoint is also represented, such as pro-choice and pro-life; pro-gun and anti-gun control groups)
7. Faith community-based programs that provide services only to members of their own congregations
8. Organizations that only provide funding for programs offered by direct service providers. Include the providers that offer those services.
9. National organizations with local chapters that directly administer services. The local chapter should be listed. Their affiliation with the national organization may be noted in their description. However, if the national organization also delivers services to the public, list it also.
10. Organizations that exist solely to serve the clients of another service provider. For example, if a counseling service only serves clients of DSS's Child Protective Services program under a contract, do not include the counseling service in the database. Instead indicate in the DSS Child Protective Services program description that counseling can be provided to Child Protective Services clients by the separate counseling service.

Review

All centers shall have a Review Committee in place to evaluate program entries submitted for inclusion into their database. This committee will be composed of no less than three members at least two of whom shall be members of the regional I&R staff (i.e., I&R Specialist, I&R Program Coordinator, or the I&R Manager) or staff of partner agencies. This committee can meet on demand to evaluate a program's mission statement and its conformity to these I&R guidelines.

Denial

If a program is found ineligible for listing in a regional database, that center will inform the service provider of their decision. Notification should be by letter, with a brief statement of reason for ineligibility, within 30 days from the service provider's submission of program information.

Appeal

Each center shall have an appeal process in place. Service providers must request an appeal hearing in writing no later than 30 days from the date of denial. A representative of the excluded agency will be allowed to meet with an I&R program representative to present the service provider's case.

Note: To eliminate misunderstandings where right of inclusion is concerned, each center should add a warning on each survey or update form stating that the I&R may exclude or remove an agency for any reason - *inclusion is a privilege, not a right.*

Complaints regarding a service provider

Before an I&R center will act on a complaint regarding a service provider, the complaint shall be submitted to the I&R Center in writing. Complaints may come from the complainant or from a staff member taking the information from the complainant. This written complaint shall be dated, with a detailed description of the complaint and signed by the complainant. Complainants may be either inquirers or human service professionals, including members of the staff of an I&R center.

Once a formal complaint has been made, the Review Committee shall review the complaint within seven days. Within three days of completion of the review, the subject service provider shall be notified in writing of the complaint, along with the recommended action.

If the Review Committee decides that this service provider shall be removed from the database, notification shall include the agency's right of appeal.

Confidentiality

To protect the confidentiality of the complainant, neither the Review Committee nor the I&R Center shall reveal the name of the complainant protesting the inclusion of a particular organization in the database.

Concurrent Reviews

The complainant may also be referred to other agencies with investigative authority to file a complaint. Depending on the nature of the complaint, these might include licensing, law enforcement, or funding sources.

Review of Criteria

The Database Manager's Group of the Statewide I&R System shall review these criteria every three years.

June 2002

I&R Products

Statewide Database on the Web

Consult the statewide I&R web site through <http://www.dss.state.va.us/community/iandr> and going to the bottom of the page.

Statewide Database on Diskette

The statewide database is available on diskette with self-installing search engines. Contact Richmond United Way Services, the center designated to maintain the database on behalf of the Statewide I&R System:

Shelia Archer, I&R Database Manager
Richmond United Way Services
P.O. Box 12209
Richmond, VA 23241

Phone: 804 771-5874
e-mail: archers@yourunitedway.org

Prices vary with the number of PCs having access to the database on disk, whether access is through a LAN or WAN (Local Area Network or Wide Area Network) or through multiple installations. Non-profit organizations as well as local, Virginia and federal government agencies receive discounts as the contribution of the Statewide I&R System to the human service delivery system.

Prices for a one-year subscription to the Directory on Disk include one update after six months, a license and a users' manual and 30 minutes of telephone technical support.

On-site training in use of the Directory on Disk is available under separate agreement for additional cost.

The statewide database is too large to produce a printed directory.

Regional Products

All regional I&R centers in Virginia's Statewide I&R System let you

- talk to a professional I&R Specialist by phone - it's free and confidential
- request a copy of your region's statistics on the problems and needs of callers or specialized reports on community resources
- request a free brochure on the Statewide I&R System

In addition, each regional center has used local resources to provide additional services. Availability and cost vary by region. In some regions, you can

I&R Products

Page 2

- ask for a guide to frequently used services
- read a detailed published directory of human services in your local library or buy it for your organization
- view an on-line database of regional services
- buy a self-installing searchable PC version of the regional database
- purchase mailing labels addressed to human service organizations

Statewide Directory on Disk	Number of PCs			
Annual Subscription	One	2 - 9	10 - 49	50 +
Standard Price *	\$ 200	\$ 400	\$ 800	\$ 1,200
Non-Profit & Gov't Price *	\$ 150	\$ 300	\$ 600	\$ 900
* Shipping & Handling per order	\$ 15	\$ 15	\$ 15	\$ 15
per user cost at these rates				
	Number of Users	Standard		Discount
	1 or 2	200.00		150.00
	3	133.33		100.00
	4	100.00		75.00
	5	80.00		60.00
	6	66.67		50.00
	7	57.14		42.86
	8	50.00		37.50
	9	44.44		33.33
	10	80.00		60.00
	20	40.00		30.00
	30	26.67		20.00
	40	20.00		15.00
	50	24.00		18.00
	75	16.00		12.00
	100	12.00		9.00

Virginia Statewide Information & Referral System Quarterly Report Requirements

Due by the 30th of April, July, October, January for the previous three months

One Excel spreadsheet format to contain several reports: Contact Type, Top Ten Problems/Needs, Location of Inquirers, Top Five Unmet Needs and Products Distributed. The I&R Center of Central Virginia has furnished format on disk. Open their file. Under View, Header/Footer, change the name of the I&R Center in the Header to your center's name. Change the names of the counties and cities in your I&R Region in the Footer to those in your area. Use the style of the list on the Statewide I&R Directory. Save the report onto their disk. Then print and review.

The 25.0% error will disappear and charts will automatically generate as values are entered into columns. Do not change either the formula or the appearance of the charts.

Plan to add rows within some tables to reflect any regional initiatives:

- Call Types – Do not change any of the standard categories listed. Insert rows above the Other row for regional initiatives such as * Lawyer Referral, * Telephone Reassurance, or other services operated by the I&R center. Do not include those operated by your parent organization. Begin each regional initiative category with an asterisk and a space. Inserting these rows above the Other row in the table automatically includes their numbers in the Sum formula in the Total cell. Examine inserted rows to be sure they are the same height as originals and that the names are the same font and size. Save.
- Geographic Report – Change the listed categories to all the counties and then all the cities in your region, one per line. Insert as many rows as needed above the Other line. Inserting these rows above the Other row in the table automatically includes their numbers in the Sum formula in the Total cell. Examine inserted rows to be sure they are the same height as originals and that the names are the same font and size. Save.
- Products Report – Use of this report is optional with the regional center. If your center will be submitting this report, change the listed categories to the products appropriate to your region, one per line. Insert as many rows as needed above the Other line. Begin each regional product category with an asterisk. Inserting these rows above the Other row in the table automatically includes their numbers in the Sum formula in the Total cell. Examine inserted rows to be sure they are the same height as originals and that the names are the same font and size.

Save the modified report onto their disk and onto your hard drive. Store the disk in a secure place.

Each quarter, open this report, change the dates in the header, and save the report by a unique name like March 01 I&R Report.xls. **Warning:** If you do not start with this original document each time, some formulas may not work.

Quarterly Report Requirements

Page 2

Run reports in IRis software as specified below. Input the numbers into the spreadsheet. Only enter numbers for categories listed. All formulas are entered.

Once you enter current numbers, graphs will automatically change with new numbers and categories.

Please remember that those regional centers with satellite offices and partners need to compile their IRis reports separately, then enter the totals into your regional reports. Or you may enter your numbers in the regional report by using the equals sign and adding the numbers for your center and each satellite offices or partner within each number cell (=100+50+5+2).

Call Type:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Demographic Statistics.
2. Enter the appropriate dates and check the [] Call Type box in the left column. Record numbers for the region and all partners in the I&R Quarterly Report Excel File. Do not change the order of the standard categories. Save.

Top Ten Needs:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Problems/Needs Statistics and select Major Category's %. Enter date range and run. Record the top ten categories for the region and all partners, removing the placeholder numbers in the left column. Record their numbers in the I&R Quarterly Report Excel File. The Total Top Ten Categories and the Percent column will automatically calculate.
2. Be sure the report goes from largest number to the smallest. Select the ten rows of categories and use Data, Sort, My list has Header, Sort by Number and Then by Category.
3. Enter the Total of all Categories from the Period Total on the IRis report. Save.

Geographic Report:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Demographic Statistics.
2. Enter the appropriate dates and check the [] Geographic Area box in the left column. Record numbers for the region and all partners in the I&R Quarterly Report Excel File. Do not change the order of the counties and cities. Calls reported from outside your region, or as Other or Unknown, should be combined and reported as Other in the Excel File. Delete any rows where the number is 0. Save.

Top 5 Unmet Needs:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Unmet Needs Report. Enter dates and run. Select the top five unmet needs for the region and all partners and record Needs and numbers in the I&R Quarterly Report Excel File. Remove the placeholder numbers in the Need column.
2. Be sure the report goes from largest number to the smallest. Select the five rows of Needs and use Data, Sort, My list has Header, Sort by Number and Then by Need.
3. Attach the Unmet Needs Report from IRis to the back of the Quarterly Report.

Quarterly Report Requirements

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Product Distribution:

Option of Regional Center. Use your regional system for tracking Products distributed. Remove any rows for which the number is 0.

I&R Staff Activities:

1. Use I&R Quarterly Narrative Word Document.
2. Describe in paragraphs staff activities through out the quarter including I&R promotional activity and use of I&R data in planning human services.

Service Scenarios:

1. Use I&R Quarterly Narrative Word Document.
2. Describe briefly three inquiries, illustrating different types of contacts.

Mail to: Ms. Kittie H. Winston
I&R Program Manager
Division of Communications
Virginia Department of Social Services
730 East Broad Street, 9th Floor
Richmond, VA 23219-1849

QUARTERLY REPORTS LOG OUT

Reports Required under Contracts with the Virginia Department of Social Services

Reports	July 1 - Sept. 30 Due Oct. 30	Oct. 1 - Dec. 31 Due Jan. 30	Jan. 1 - Mar. 31 Due Apr. 30	Apr. 1 - June 30 Due July 30	Send To Statewide I&R *	Send to Lynchburg for VDH MCH **
Quarterly Report (Final: 6/30/01)					X	
Unmet Needs					X	
Narrative with 3 Brief Descriptions of 3 Types of Contacts + Other Info					X	
MCH Problems/ Needs (Final: 6/30/01)						X
MCH Unmet Needs						X
MCH Follow-Up Results						X
Newborn Hearing Screening - Printouts of each Contact Record ***						

* See Reverse for Address

Virginia Statewide Information & Referral System

Partner Quarterly Report Requirements

Due by the 15th of April, July, October, January for the previous three months

One Excel spreadsheet format to contain several reports: Contact Type, Top Ten Problems/Needs, Location of Inquirers, Top Five Unmet Needs and Products Distributed. The **I&R Center of ??** has furnished format on disk. Open their file. Under View, Header/Footer, change the name of the I&R Center in the Header to your center's name. Change the names of the counties and cities in your I&R Region in the Footer to those in your area. Save the report onto their disk. Save the modified report onto their disk and onto your hard drive. Store the disk in a secure place.

The 25.0% error will disappear and charts will automatically generate as values are entered into columns. Do not change either the formula or the appearance of the charts.

Each quarter, open this report, change the dates in the header, and save the report by a unique name like March 01 I&R Report.xls. **Warning:** If you do not start with this original document each time, some formulas may not work.

Run reports in IRis software as specified below. Input the numbers into the spreadsheet. Only enter numbers for categories listed. All formulas are entered.

Once you enter current numbers, graphs will automatically change with new numbers and categories.

Your reports will be combined into totals for regional reports.

Call Type:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Demographic Statistics.
2. Enter the appropriate dates and check the [] Call Type box in the left column. Record numbers in the I&R Quarterly Report Excel File. Do not change the order of the standard categories. Save.

Top Ten Needs:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Problems/Needs Statistics and select Major Category's %. Enter date range and run.
2. Submit the Problems/Needs Report from IRis along with the Quarterly Report from Excel.
3. Optional: You may skip the following steps for Needs. If you want a report on the top ten needs for your area, record your top ten categories in the I&R Quarterly Report Excel File, removing the placeholder numbers in the left column. The Total Top Ten Categories and the Percent column will automatically calculate.
4. Be sure the report goes from largest number to the smallest. Select the ten rows of categories and use Data, Sort, My list has Header, Sort by Number and Then by Category.
5. Enter the Total of all Categories from the Period Total on the IRis report. Save.

Geographic Report:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Demographic Statistics.

Partner Quarterly Report Requirements

Page 2

2. Enter the appropriate dates and check the [] Geographic Area box in the left column. Record numbers in the I&R Quarterly Report Excel File. Do not change the order of the counties and cities. Calls reported from outside your region, or as Other or Unknown, should be combined and reported as Other in the Excel File. Delete any rows where the number is 0. Save.

Top 5 Unmet Needs:

1. Run report in IRis software, Options, Supervisors Options, Reports, Contacts: Unmet Needs Report. Enter dates and run.
2. Submit the Unmet Needs Report from IRis along with the Quarterly Report from Excel.
3. Optional: You may ship the following steps for Unmet Needs. If you want a report on your top five unmet needs, record Needs and numbers in the I&R Quarterly Report Excel File. Remove the placeholder numbers in the Need column.
4. Be sure the report goes from largest number to the smallest. Select the five rows of Needs and use Data, Sort, My list has Header, Sort by Number and Then by Need.

Product Distribution:

Option of Regional Center. Use your internal system for tracking Products distributed. Remove any rows for which the number is 0.

I&R Staff Activities:

1. Use I&R Quarterly Narrative Word Document.
2. Describe in paragraphs staff activities through out the quarter including I&R promotional activity and use of I&R data in planning human services.

Service Scenarios:

1. Use I&R Quarterly Narrative Word Document.
2. Describe briefly three inquiries, illustrating different types of contacts.

Mail to: **Mrs. Sandra King, Director
Council of Community Services/I&R
P.O. Box 598
Roanoke, VA 24004**

Include: **Maternal & Child Health Report
Maternal & Child Health Unmet Needs
Maternal & Child Health Follow-Up Call Results
Quarterly Report
Problems/Needs Report, Major Categories with
Percents
Unmet Needs Report**

SAMPLE

Information & Referral Center
Quarterly Report
April 1, 2002 - June 30, 2001

Contact Type	Number of Contacts
<i>Information</i>	623
<i>Referral</i>	626
<i>Advocacy/Intervention</i>	25
<i>Emergency</i>	10
<i>Follow-up</i>	223
<i>Follow-up & Referral</i>	3
<i>Other</i>	540
Total	2050

For the Counties of:

SAMPLE

Information & Referral Center
Quarterly Report
April 1, 2002 - June 30, 2002

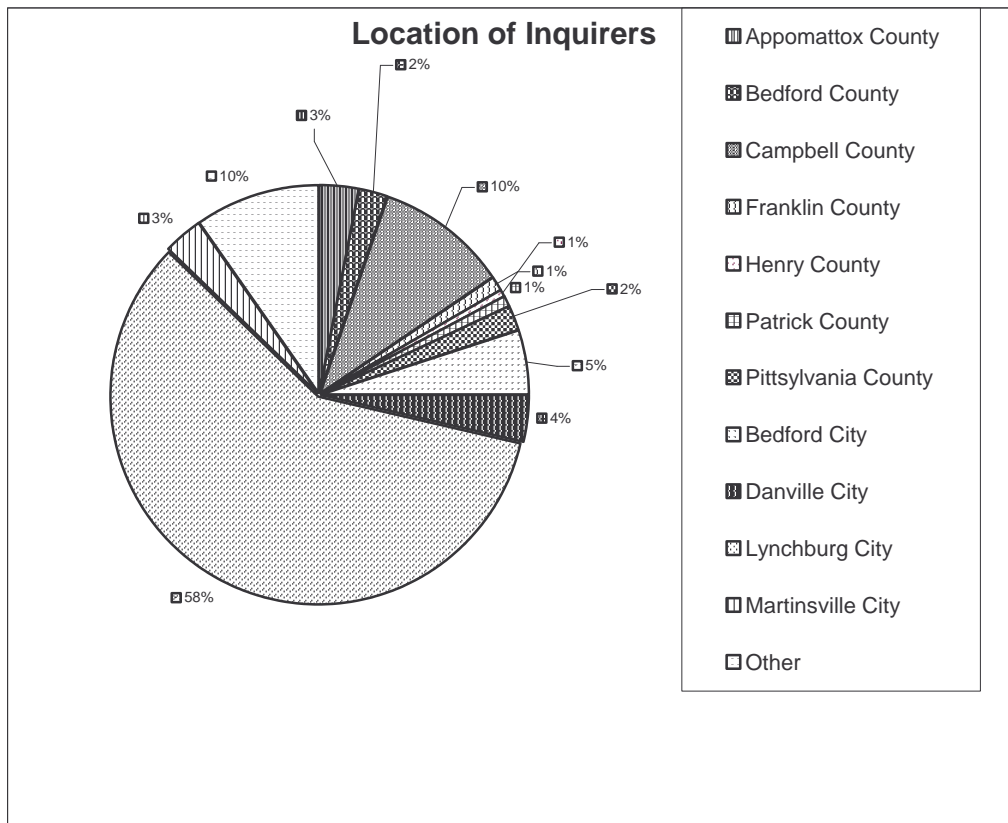
Geographic Report

Location of Inquirers	Number of Inquiries
Amhurst County	106
Appomattox County	57
Bedford County	42
Campbell County	198
Franklin County	21
Henry County	14
Patrick County	12
Pittsylvania County	36
Bedford City	100
Danville City	69
Lynchburg City	1119
Martinsville City	57
Other	188
Total Inquiries	1913

SAMPLE

**Council of Community Services/I&R
Quarterly Report
April 1, 2002 - June 30, 2002**

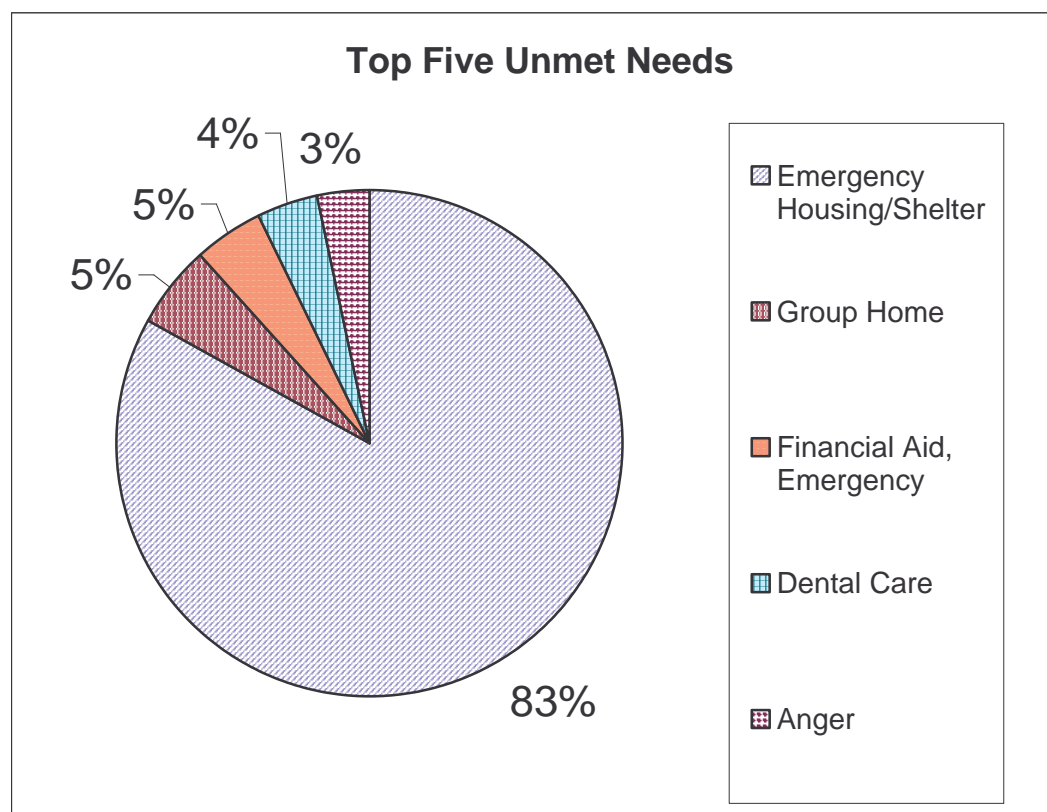
Geographic Report (cont'd)



SAMPLE

Council of Community Services/I&R
Quarterly Report
April 1, 2002 - June 30, 2002

Top Five Unmet Needs		
Need	Number Reported	
<i>Emergency Housing/Shelter</i>	127	
<i>Group Home</i>	8	
<i>Financial Aid, Emergency</i>	7	
<i>Dental Care</i>	6	
<i>Anger</i>	5	
Total Unmet Needs	153	



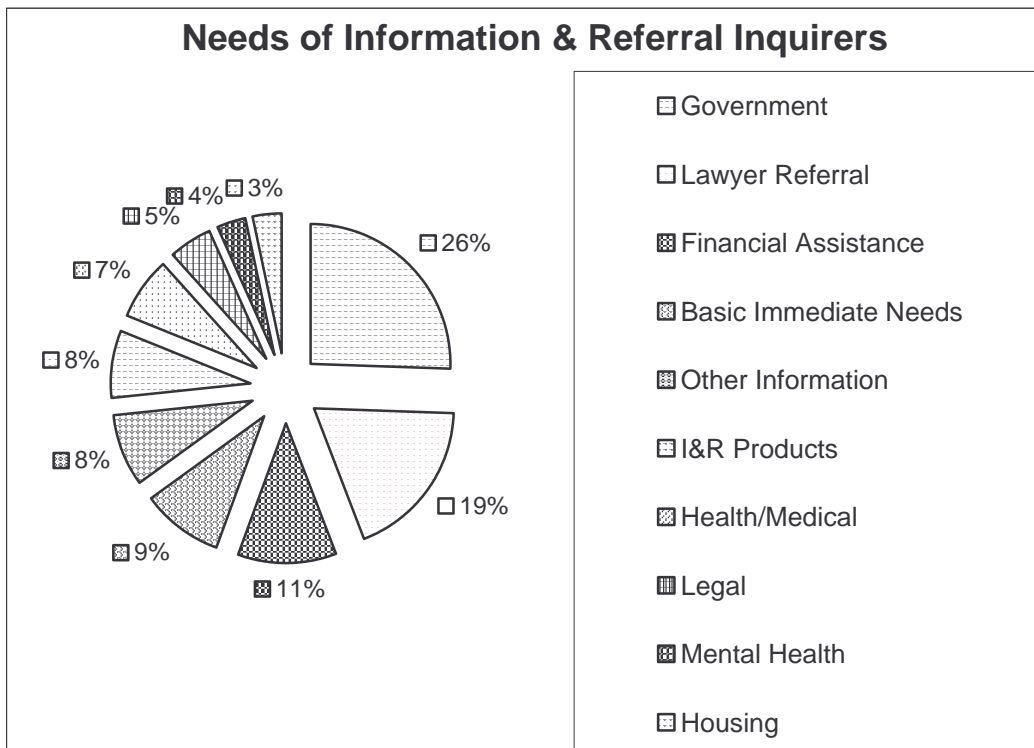
SAMPLE

Council of Community Services/I&R
Quarterly Report
April 1, 2002 - June 30, 2002

Top Ten Needs of Information & Referral Inquirers

Category	Number	Percent
<i>Government</i>	425	25.6%
<i>Lawyer Referral</i>	307	18.5%
<i>Financial Assistance</i>	188	11.3%
<i>Basic Immediate Needs</i>	157	9.5%
<i>Other Information</i>	136	8.2%
<i>I&R Products</i>	133	8.0%
<i>Health/Medical</i>	117	7.1%
<i>Legal</i>	82	4.9%
<i>Mental Health</i>	59	3.6%
<i>Housing</i>	53	3.2%
TOTAL TOP TEN CATEGORIES	1657	100.0%
GRAND TOTAL ALL CATEGORIES	2030	100.0%

Needs of Information & Referral Inquirers



SAMPLE

Council of Community Services/I&R
Quarterly Report
April 1, 2002 - June 30, 2002

<i>Product</i>	<i>Number of Products Distributed</i>
<i>Statewide Brochures</i>	357
<i>Key Chains</i>	60
<i>Pens and Pencils</i>	385
<i>Saddle Bags</i>	1
<i>Tote Bags</i>	2
<i>Writing Tablets</i>	15
<i>* Magnets</i>	450
<i>* PD 11 Brochures</i>	295
<i>* PD 12 Brochures</i>	100
<i>* PD 11 Guide Tough Times</i>	165
<i>* PD 12 Guide Tough Times</i>	140
<i>* PD 11 Quick Sheets</i>	350
<i>* PD 12 Quick Sheets</i>	255
Total	2575

Virginia Statewide Information & Referral System Maternal Child & Health Report Requirements

Due by the 30th of April, July, October, January for the previous three months

1. **MCH Problem Needs Report with subcategories in Excel spreadsheet format.** The I&R Center of Central Virginia has furnished format on disk. Open their file. Under View, Header/Footer, change the name of the I&R Center to your center's name. Save the report onto their disk and onto your hard drive.

The 25.0% error will disappear as values are entered into columns B and C. Do not change this formula.

Each quarter, open this report, change the dates in the header, and save the report by a unique name like March 01 MCH Report.xls. Warning: If you do not start with this original document each time, some formulas may not work.

Run two Problem/Needs reports with Subcategories in IRis, with and without the MCH filter. Input the numbers into the spreadsheet. Only enter numbers for subcategories listed.

MCH Calls Column (Column B) – **Input the numbers from the Problem Needs Report with subcategories with MCH Filter. Use only the Period Total Column and enter the lines and subtotals for each category listed on the MCH Report.**

Grand Total MCH Categories (Column B, Line 199) – **Calculated by formula. Do not type in this number.**

Grand Total All Categories, MCH Calls (Column B, Line 200) – **Type in this number from the Problem Needs Report with Subcategories with the MCH filter. Use the Period Total column, Grand Total row.**

Total Calls to Center (Column C) – **Input the numbers from the Problem Needs Report with Subcategories with no filter. Use only the Period Total Column and enter only the lines and subtotals for each category listed on the MCH Report.**

Grand Total MCH Categories, Total Calls to Center (Column C, Line 199) – **Calculated by formula. Do not type in this number.**

Grand Total All Categories, Total Calls to Center (Column C, Line 200) – Type in. Take from Problem Needs Report with Subcategories with no filter, Period Total Column at the bottom of the last page of report.

% of MCH Calls By Category (Column D) – **Calculated by formula. Do not type in this column. The 25.0% error will disappear as values are entered into columns B and C. After those entries are completed, go back through Column D, and type 0 in any fields still showing the 25.0% Error. Print report.**

2. Unmet needs report with MCH filter. Submit printed report as generated by IRis software.
3. Follow-up Call Results with MCH filter. Run report in IRis, Options, Supervisors Options, Reports, User-Defined Pop-Ups Report 6-10 with MCH filter. Enter the dates and check [] I&R Satisfaction and [] Service Satisfaction. then [Set Filter Conditions] and [Select Custom Filter] to Maternal & Child Health. Submit printed report as generated by IRis software.

Mail to: Joan Phelps, I&R Center Director
United Way of Central Virginia
P. O. Box 2434
Lynchburg, VA 24501

SAMPLE FORMAT

COUNCIL OF COMMUNITY SERVICES/I&R

Misrouted Call Report				Month, 2002
NPA	NXX	ORG	Notes	
(area code of caller)	(exchange of caller)			
703	583	00009	incorrectly listed as 00010	
703	845	00011	incorrectly listed as 00010	

SAMPLE
Council of Community Services/I&R
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2002 through June 30, 2002

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
ABUSE/NEGLECT			
Adult/Elder Abuse/Neglect	3	6	15.0%
Child Abuse/Neglect			25.0%
Sub Total	22	35	12.0%
ADOPTION/FOSTER CARE			
Adoption			25.0%
Foster Care			55.0%
Sub Total	44	12	25.0%
BASIC IMMEDIATE NEEDS			
Emergency Food			25.0%
Clothing/Personal Items			25.0%
Diapers			25.0%
Emergency Housing/Shelter			35.0%
Financial Aid, Emergency			25.0%
Infant/Children Equipment			25.0%
Household Items			25.0%
Sub Total	100	220	25.0%
CASE MANAGEMENT			
Sub Total	529	33	25.0%
CONSUMER			
Consumer Complaints			33.0%
Consumer Education			25.0%
Consumer Protection			25.0%
Consumer Credit/Money Mgmt.			25.0%
Sub Total	0	0	11.0%
DAY CARE, CHILD/ADULT			
Adult Day Care			25.0%
Child Care			25.0%
Child Care Subsidy			25.0%
Sub Total	0	0	25.0%
DISABILITIES			
Disability Information			25.0%
Assistive Technology Devices			25.0%
Disability Support Groups			25.0%
Sub Total	0	0	25.0%
EDUCATION			
Adult Education/GED/CEUs			25.0%
Basic Ed/Literacy			25.0%
College/University			25.0%

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
Driver Education			25.0%
Parenting Education			25.0%
School Supply Assistance			25.0%
Special Education			25.0%
Student Loans/Grants			25.0%
Tutoring			25.0%
Vocational Education			25.0%
Sub Total	78	60	25.0%
FINANCIAL ASSISTANCE			
TANF/ Asst. to Needy Fam.			25.0%
Financial Aid Ongoing			25.0%
Burial Assistance			25.0%
Car Repair Assistance			25.0%
Cooling Assistance Referrals			25.0%
Heating Assistance			25.0%
Other Utilities Assistance			25.0%
Other Financial Aid			25.0%
Telephone Payment Assistance			25.0%
Sub Total	220	50	25.0%
FOOD			
Non-Emergency Food			25.0%
Government Surplus Food			25.0%
Home-Delivered Meals			25.0%
Meal Sites			25.0%
Food Stamps			25.0%
Food Co-Op			28.0%
Self-Help Food Exchange			25.0%
Nutrition Education			25.0%
Nutrition Supplements			25.0%
WIC Food Program			25.0%
Sub Total	10	90	25.0%
HEALTH/MEDICAL			
Medical/Health Information			25.0%
CMSIP/FAMIS			25.0%
Medical/Health Screening			25.0%
Medical Care/Treatment			25.0%
Free Clinic			24.0%
Medical/Equip./Supplies			25.0%
Dental Care			25.0%
Hospice Care			25.0%
Nursing Home			25.0%
STD, Sex Transmitted Disease			25.0%
AIDS/HIV			22.0%
Poison Control			25.0%
Health Support Groups			25.0%
Cancer			25.0%
Cholesterol			75.0%
Heart Conditions			25.0%
High Blood Pressure			85.0%

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
Smoking			25.0%
Medicaid			25.0%
Medicare			25.0%
Medication Payment Assistance			25.0%
Other Medical Financial Aid			25.0%
Vital Statistics			25.0%
Sub Total	80	60	25.0%
HOME CARE			
Home Nursing			25.0%
Home Health Aid			25.0%
Companion			25.0%
Chore/Errand Service			25.0%
Rehabilitation			25.0%
Respite Care			25.0%
Friendly Visitors			25.0%
Telephone Reassurance			25.0%
Sub Total	40	80	25.0%
HOUSING			
Housing Search Assistance			25.0%
Mortgage Aid			25.0%
Rent Aid			25.0%
Subsidized Housing			25.0%
Assisted/Retirement Housing			25.0%
Home Ownership			25.0%
Group Home			25.0%
Halfway House			25.0%
Home Repairs/Construction			25.0%
Sub Total	30	30	25.0%
INSURANCE			
Insurance Complaints/Inquiries			85.0%
Insur. Counseling/Forms Asst,			25.0%
Disability Insurance			25.0%
Social Security			25.0%
Sub Total	50	70	95.0%
MATERNAL & CHILDREN HEALTH			
Breast Cancer Prevention			25.0%
Cervical Cancer Prevention			25.0%
Childbirth Preparation			25.0%
Family Plan/Birth Control			23.0%
Pregnancy			25.0%
Pregnancy Nutrition			25.0%
Prenatal Care			25.0%
Sterilization		3	45.0%
Breastfeeding			25.0%
Child Care Seats			25.0%
Childhood Injury Prevention			25.0%
Children with Special Needs			25.0%
Developmental Ed for Children			25.0%

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
Immunizations			25.0%
Infant/Child Nutrition			25.0%
Lead Poisoning			25.0%
Newborn Hearing Screening			25.0%
Newborn Screening			25.0%
Pediatrics			25.0%
School Nursing			25.0%
Sudden Infant Death Syndrome			25.0%
Well Baby Care			25.0%
Sub Total	50	70	25.0%
MENTAL HEALTH			
Mental Health Crisis			25.0%
Mental Health Information			25.0%
Mental Illness			25.0%
Death/Grief			25.0%
Anxiety			25.0%
Personal Problem			25.0%
Marital/Couples Relationship			25.0%
Family Relationship Problem			25.0%
Mental Health Support Groups			25.0%
Other Interpersonal Problem			25.0%
Parent/Child Problem			25.0%
Anger			25.0%
Sexual Problem			25.0%
Sexual Identity Issues			25.0%
Sub Total	80	10	25.0%
SUBSTANCE ABUSE			
Alcohol Abuse/Addiction			25.0%
Drug Abuse/Addiction			25.0%
Alcohol/Drug Support Grp.			25.0%
Sub Total	40	40	25.0%
SUICIDE			
Information About Suicide			25.0%
Contemplated Suicide			25.0%
Suicide Survivors			25.0%
Sub Total	60	50	25.0%
TEEN PREGNANCY			
Teen Pregnancy Prevention			25.0%
Resource Mothers			25.0%
Teen Pregnancy Services			25.0%
Sub Total	30	20	25.0%
TRANSLATION/INTERPRETATION			
Other Languages			25.0%
Speech/Hearing Impaired			25.0%
Sub Total	50	90	25.0%
TRANSPORTATION			

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
Travelers Aid			25.0%
Sub Total	30	50	25.0%
VIOLENCE			
Aggressor Counseling			25.0%
Date Rape			25.0%
Domestic Violence			25.0%
Rape			25.0%
Sexual Assault			25.0%
Sub Total	50	60	25.0%
Grand Total MCH Categories	350	590	25.0%
 Grand Total All Categories	 Type in	 Type in	 95%

Quarterly Reports Log Out

Reports Required under Contracts with the Virginia Department of Social Services

Reports	July 1 - Sept. 30 Due Oct. 30	Oct. 1 - Dec. 31 Due Jan. 30	Jan. 1 - Mar. 31 Due Apr. 30	Apr. 1 - June 30 Due July 30	Send To Statewide I&R *	Send to Lynchburg for VDH MCH **
Quarterly Report (Final: 6/30/01)					X	
Unmet Needs					X	
Narrative with 3 Brief Descriptions of 3 Types of Contacts + Other Info					X	
MCH Problems/ Needs (Final: 6/30/01)						X
MCH Unmet Needs						X
MCH Follow-Up Results						X
Newborn Hearing Screening - Printouts of each Contact Record ***						

* See Reverse for Address

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
ABUSE/NEGLECT			
Adult/Elder Abuse/Neglect			0.0%
Child Abuse/Neglect	2	6	33.3%
Sub Total	2	6	33.3%
ADOPTION/FOSTER CARE			
Adoption			0.0%
Foster Care			0.0%
Sub Total	0	0	0.0%
BASIC IMMEDIATE NEEDS			
Emergency Food	9	17	0.0%
Clothing/Personal Items		3	0.0%
Diapers	1	1	0.7%
Emergency Housing/Shelter	59	100	43.4%
Financial Aid, Emergency	4	7	2.9%
Infant/Children Equipment	4	4	2.9%
Household Items	1	4	0.7%
Sub Total	78	136	57.4%
CASE MANAGEMENT			
Sub Total	0	3	0.0%
CONSUMER			
Consumer Complaints		11	0.0%
Consumer Education			0.0%
Consumer Protection		1	0.0%
Consumer Credit/Money Mgmt.		5	0.0%
Sub Total	0	17	0.0%
DAY CARE, CHILD/ADULT			
Adult Day Care	2	1	22.2%
Child Care	7	8	77.8%
Child Care Subsidy			0.0%
Sub Total	9	9	100.0%
DISABILITIES			
Disability Information	6	19	27.3%
Assistive Technology Devices		3	0.0%
Disability Support Groups			0.0%
Sub Total	6	22	27.3%

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
EDUCATION			
Adult Education/GED/CEUs		2	0.0%
Basic Ed/Literacy		2	0.0%
College/University		2	0.0%
Education for Children	1	4	7.7%
Driver Education			0.0%
Parenting Education		1	0.0%
School Supply Assistance			0.0%
Special Education	2	2	15.4%
Student Loans/Grants			0.0%
Tutoring			0.0%
Vocational Education			0.0%
Sub Total	3	13	23.1%
FINANCIAL ASSISTANCE			
TANF/ Asst. to Needy Fam.			0.0%
Financial Aid Ongoing			0.0%
Burial Assistance		1	0.0%
Car Repair Assistance			0.0%
Cooling Assistance Referrals			0.0%
Heating Assistance	3	10	3.5%
Other Utilities Assistance	26	50	30.6%
Other Financial Aid	4	24	4.7%
Telephone Payment Assistance			0.0%
Sub Total	33	85	38.8%
FOOD			
Non-Emergency Food			0.0%
Government Surplus Food			0.0%
Home-Delivered Meals		1	0.0%
Meal Sites		2	0.0%
Food Stamps			0.0%
Food Co-Op			0.0%
Self-Help Food Exchange			0.0%
Nutrition Education		1	0.0%
Nutrition Supplements			0.0%
WIC Food Program			0.0%
Sub Total	0	4	0.0%

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
HEALTH/MEDICAL			
Medical/Health Information	5	21	5.3%
CMSIP/FAMIS	5	10	5.3%
Medical/Health Screening		1	0.0%
Medical Care/Treatment	4	9	4.3%
Free Clinic	1	1	1.1%
Medical/Equip./Supplies	1	10	1.1%
Dental Care	1	5	1.1%
Hospice Care			0.0%
Nursing Home			0.0%
STD, Sex Transmitted Disease		1	0.0%
AIDS/HIV		1	0.0%
Poison Control			0.0%
Health Support Groups	1	1	1.1%
Cancer		1	0.0%
Cholesterol			0.0%
Heart Conditions		2	0.0%
High Blood Pressure			0.0%
Diabetes	1	6	1.1%
Sickle Cell Disease			0.0%
Smoking	2	2	2.1%
Medicaid	1	1	1.1%
Medicare			0.0%
Medication Payment Assistance		6	0.0%
Other Medical Financial Aid		2	0.0%
Vital Statistics	4	14	4.3%
Sub Total	26	94	27.7%
HOME CARE			
Home Nursing			0.0%
Home Health Aid			0.0%
Companion		2	0.0%
Chore/Errand Service		1	0.0%
Rehabilitation			0.0%
Respite Care			0.0%
Friendly Visitors			0.0%
Telephone Reassurance			0.0%
Sub Total	0	3	0.0%

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
HOUSING			
Housing Search Assistance	6	27	9.4%
Mortgage Aid			0.0%
Rent Aid	10	26	15.6%
Subsidized Housing		2	0.0%
Assisted/Retirement Housing		1	0.0%
Home Ownership		4	0.0%
Group Home			0.0%
Halfway House			0.0%
Home Repairs/Construction		4	0.0%
Sub Total	16	64	25.0%
INSURANCE			
Insurance Complaints/Inquiries	2	8	20.0%
Insur. Counseling/Forms Asst,			0.0%
Disability Insurance		1	0.0%
Social Security		1	0.0%
Sub Total	2	10	20.0%
MATERNAL & CHILDREN HEALTH			
Breast Cancer Prevention			0.0%
Cervical Cancer Prevention			0.0%
Childbirth Preparation	3	4	25.0%
Family Plan/Birth Control	1	1	8.3%
Pregnancy			0.0%
Pregnancy Nutrition			0.0%
Prenatal Care	1	2	8.3%
Sterilization			0.0%
Breastfeeding			0.0%
Child Care Seats			0.0%
Childhood Injury Prevention			0.0%
Developmental Ed for Children			0.0%
Fatherhood Initiative			0.0%
Hearing Testing	1	2	8.3%
Immunizations			0.0%
Infant/Child Nutrition			0.0%
Lead Poisoning			0.0%
Newborn Hearing Screening	1	2	8.3%
Newborn Screening			0.0%
Pediatrics			0.0%
School Nursing			0.0%
Sudden Infant Death Syndrome			0.0%
Well Baby Care		1	0.0%
Sub Total	7	12	58.3%

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
MENTAL HEALTH			
Mental Health Crisis	11	25	11.8%
Mental Health Information	3	12	3.2%
Mental Illness		1	0.0%
Death/Grief		5	0.0%
Anxiety	1	8	1.1%
Personal Problem		6	0.0%
Marital/Couples Relationship		4	0.0%
Family Relationship Problem	5	15	5.4%
Mental Health Support Groups	4	14	4.3%
Other Interpersonal Problem	4		4.3%
Parent/Child Problem	3	3	3.2%
Anger			0.0%
Sexual Problem			0.0%
Sexual Identity Issues			0.0%
Sub Total	31	93	33.3%
SUBSTANCE ABUSE			
Alcohol Abuse/Addiction		3	0.0%
Drug Abuse/Addiction			0.0%
Alcohol/Drug Support Grp.		1	0.0%
Sub Total	0	4	0.0%
SUICIDE			
Information About Suicide			0.0%
Contemplated Suicide	1	3	25.0%
Suicide Survivors		1	0.0%
Sub Total	1	4	25.0%
TEEN PREGNANCY			
Teen Pregnancy Prevention			0.0%
Resource Mothers			0.0%
Teen Pregnancy Services			0.0%
Sub Total	0	0	0.0%
TRANSLATION/INTERPRETATION			
Other Languages			0.0%
Speech/Hearing Impaired			0.0%
Sub Total	0	0	0.0%

Information and Referral Center of Central Virginia
Problems/Needs Category Statistics
Maternal and Child Health Report
April 1, 2001 through June 30, 2001

Category	MCH Calls	Total Calls To Center	% of MCH Calls By Category
TRANSPORTATION			
Mass Transit		9	0.0%
Special Transportation		1	0.0%
Travelers Aid			0.0%
Sub Total	0	10	0.0%
VIOLENCE			
Aggressor Counseling			0.0%
Date Rape			0.0%
Domestic Violence	1	3	33.3%
Rape			0.0%
Sexual Assault			0.0%
Sub Total	0	3	0.0%
Grand Total MCH Categories	214	592	36.1%
Grand Total All Categories	298	1539	19.4%

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001

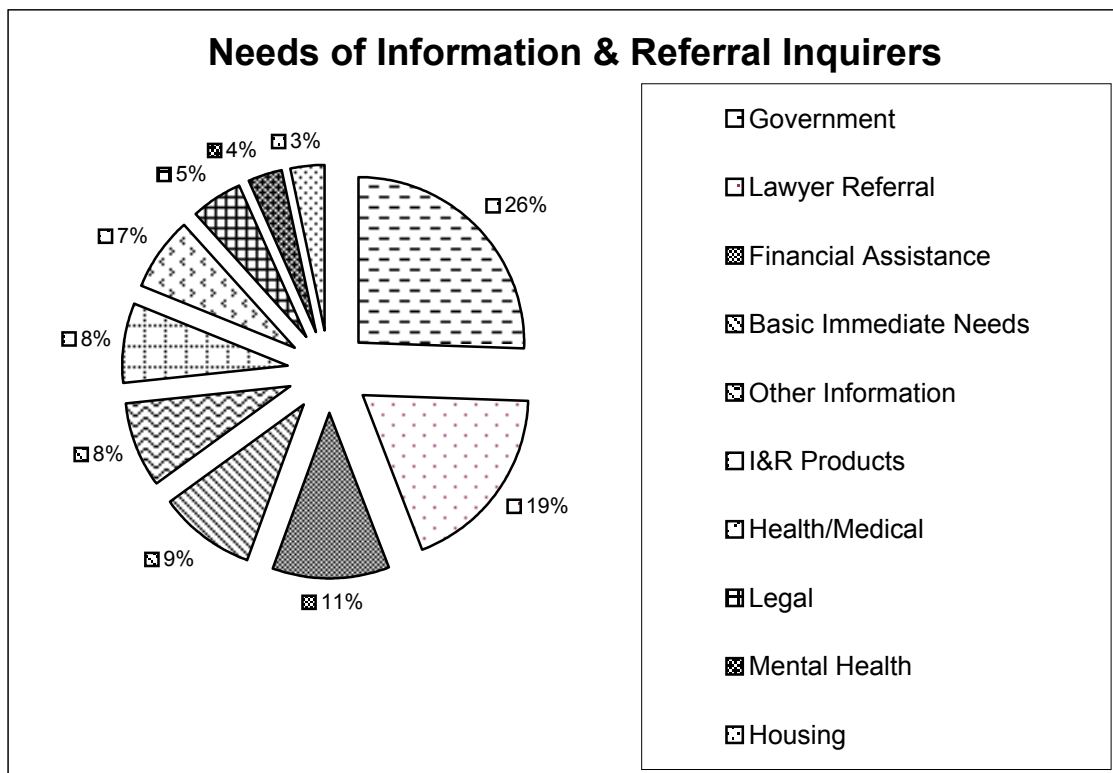
Contact Type	Number of Contacts
<i>Information</i>	623
<i>Referral</i>	626
<i>Advocacy/Intervention</i>	25
<i>Emergency</i>	10
<i>Follow-up</i>	223
<i>Follow-up & Referral</i>	3
<i>Other</i>	540
Total	2050

For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001

Top Ten Needs of Information & Referral Inquirers

Category	Number	Percent
<i>Government</i>	425	25.6%
<i>Lawyer Referral</i>	307	18.5%
<i>Financial Assistance</i>	188	11.3%
<i>Basic Immediate Needs</i>	157	9.5%
<i>Other Information</i>	136	8.2%
<i>I&R Products</i>	133	8.0%
<i>Health/Medical</i>	117	7.1%
<i>Legal</i>	82	4.9%
<i>Mental Health</i>	59	3.6%
<i>Housing</i>	53	3.2%
TOTAL TOP TEN CATEGORIES	1657	100.0%
GRAND TOTAL ALL CATEGORIES	2030	100.0%



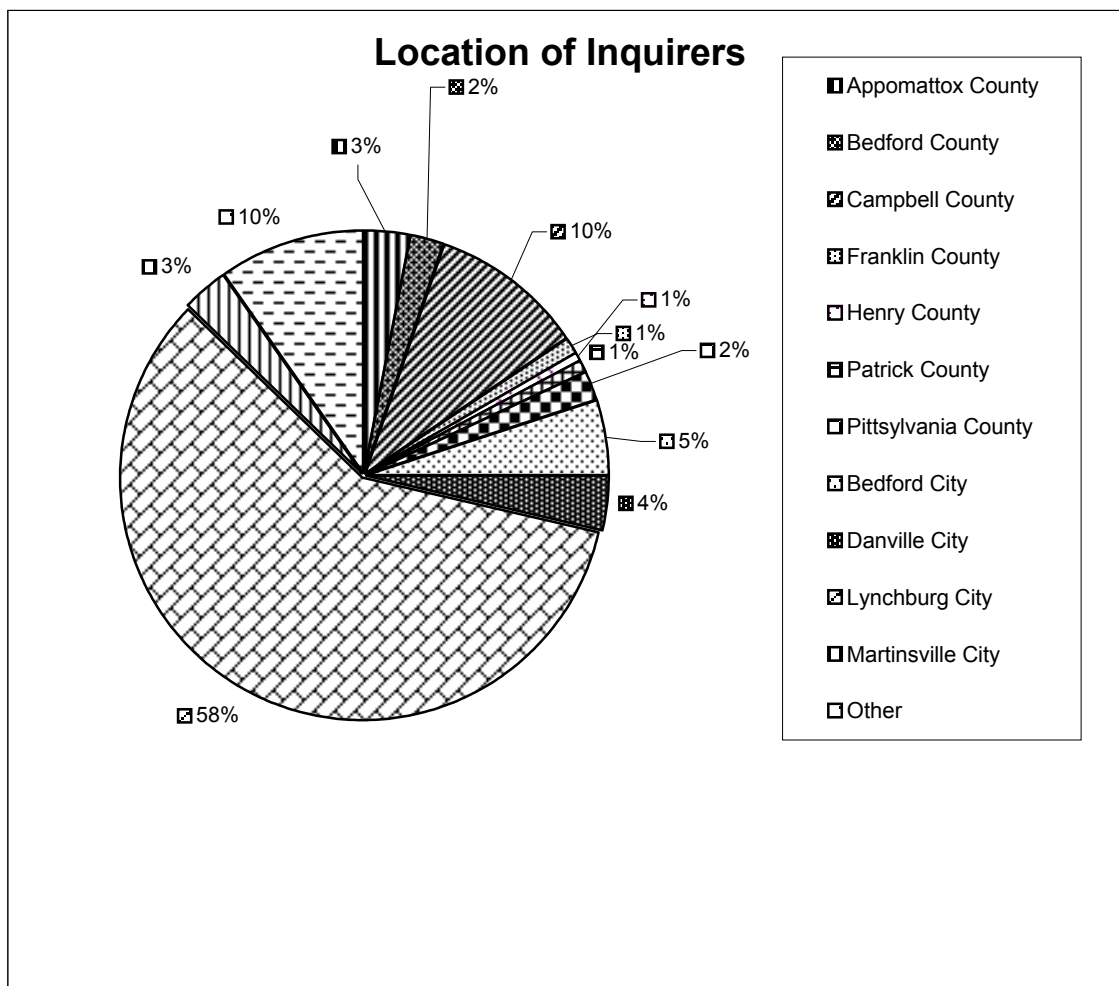
For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001
Geographic Report

<i>Location of Inquirers</i>	<i>Number of Inquiries</i>
<i>Amhurst County</i>	106
<i>Appomattox County</i>	57
<i>Bedford County</i>	42
<i>Campbell County</i>	198
<i>Franklin County</i>	21
<i>Henry County</i>	14
<i>Patrick County</i>	12
<i>Pittsylvania County</i>	36
<i>Bedford City</i>	100
<i>Danville City</i>	69
<i>Lynchburg City</i>	1119
<i>Martinsville City</i>	57
<i>Other</i>	188
Total Inquiries	1913

For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001

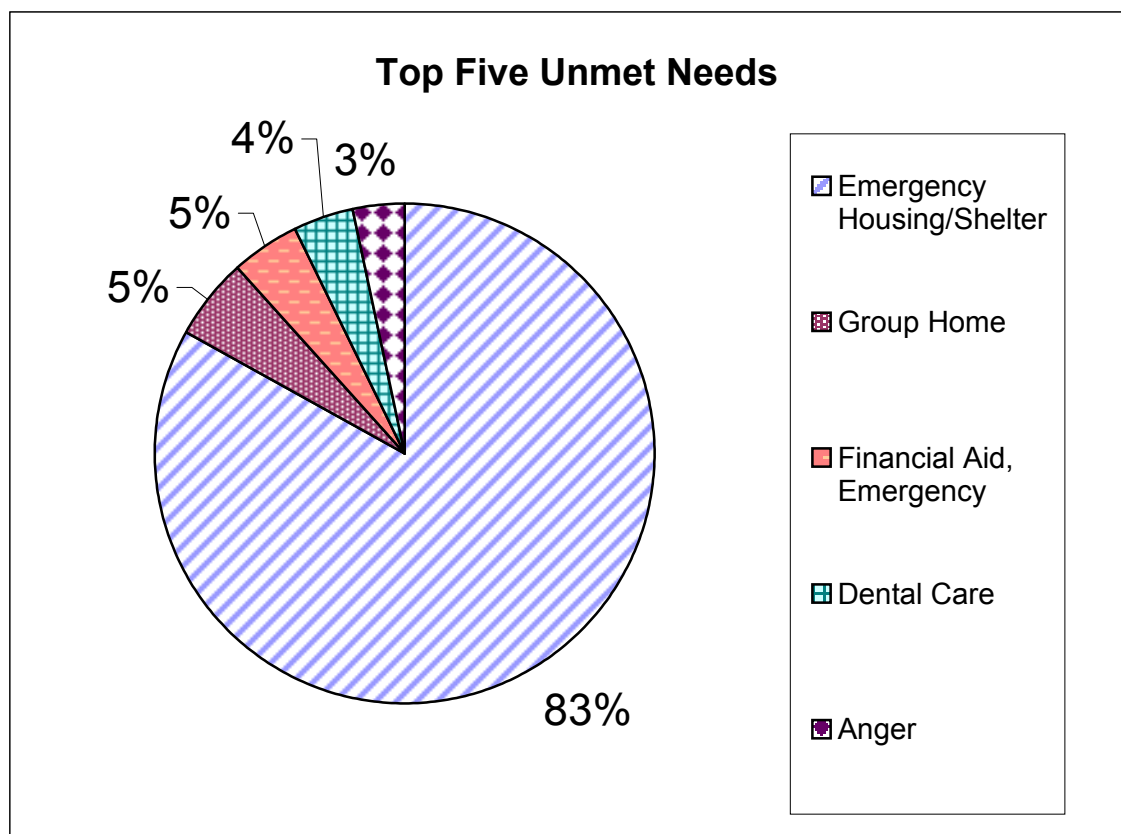


For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001

Top Five Unmet Needs

<i>Need</i>	<i>Number Reported</i>
<i>Emergency Housing/Shelter</i>	127
<i>Group Home</i>	8
<i>Financial Aid, Emergency</i>	7
<i>Dental Care</i>	6
<i>Anger</i>	5
Total Unmet Needs	153



For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

Information Referral Center of Central Virginia
Quarterly Report
April 1, 2001 - June 30, 2001

<i>Product</i>	<i>Number of Products Distributed</i>
<i>Statewide Brochures</i>	357
<i>Key Chains</i>	60
<i>Pens and Pencils</i>	385
<i>Saddle Bags</i>	1
<i>Tote Bags</i>	2
<i>Writing Tablets</i>	15
<i>* Magnets</i>	450
<i>* PD 11 Brochures</i>	295
<i>* PD 12 Brochures</i>	100
<i>* PD 11 Guide Tough Times</i>	165
<i>* PD 12 Guide Tough Times</i>	140
<i>* PD 11 Quick Sheets</i>	350
<i>* PD 12 Quick Sheets</i>	255
Total	2575

For the Counties of Amherst, Appomattox, Bedford, Campbell, Franklin, Henry, Patrick, Pittsylvania; and the Cities of Bedford, Danville, Lynchburg, Martinsville

How to Coordinate a Statewide Marketing Campaign

I: Development of Tools

- Public Service Announcements & Videos that will appeal to multiethnic populations

II: Financial Investment

- Utilize time and resources given

III: Message Development

- Comprehensive Resources
- Statewide yet, community oriented
- Help them improve the quality of their lives
- VIP- Don't reinvent the wheel
- Service Providers
- Consumers-Broad Scope
- Consumers-Poverty

Web Issues

- "How To" on the website for users
- Easy Access
- Easy to Navigate
- A "Virginia" Look

Tag/ Slogan

Virginia's I & R: Information You Can Use

Target Audience

- | | |
|-----------------------|---------------------------------|
| - Professionals | - Human Service Provider |
| - Employee Assistance | - Real Estate/Apt. Welcome Pack |
| - Human Resources | - Legislators |

How to Coordinate a Statewide Marketing Campaign

Page 2

- | | |
|------------------------|---------------------------|
| - Community Relations | - Decision Makers |
| - Business Community | - Law Enforcement |
| - Chambers of Commerce | - School System |
| - PTA's | - Colleges/Universities |
| - Community Colleges | - Guidance Counselors |
| - Resource Staff | - Department of Education |
| - Nurses | - Public Health Nurses |
| - Health Department | - Libraries |

Marketing Strategies

Speaker's Bureau

- Template for state-wide presentation (Customized by region)
- PowerPoint with slides
- Three minute videos

Outcome Measures

I. Short-term

- An increase in programs in the data base
- An increase in the call volume due to the marketing campaign

II. Intermediate and Long-term

- Measures were not given

Information and Referral Marketing Plan

I. Define Your Strategy:

Scheduling: How long are you planning your marketing campaign? Is it simply a kick off or a long-term public awareness campaign that will include an on-going maintenance work plan?

Target Audiences: Who will be your audience? Will your campaign target people who currently use your I&R service? Will your campaign be two-fold and create a broader public by also targeting those who do not know of the service?

Target Markets: Where does your target audience live, e.g. urban, suburban, and how will this affect your slogans/messages/taglines?

Confirm Messages: What topics/messages do you want to get across? Do you want to use a very general, cross-cutting health and human services issues or will you centralize messages to target specific audiences?

Confirm Resources: Are there existing social service, state, government, or corporate partnerships that you can build on? Is it possible to use existing social services media campaigns? Solicit the support of those stakeholders who are likely to support your campaign. For example: In Connecticut, a likely partner and stakeholder was the local telephone company.

Confirm Mediums: How will the message be delivered? Does the medium selected (television, radio, newspaper etc.) allow the message to reach the targeted audience? A statewide media campaign with television and radio PSA's may not be the best medium to reach the targeted audience.

Confirm Availability: Check with media outlets to determine availability during the time frame of the promotional campaign.

II. Determine Marketing Tools

The creation of new marketing material and/or an enhancement of old ones should be a next step. While the name of the program may already exist, a tagline and campaign message needs to be developed. The tagline and campaign message tells people what you want them to know about your program or service.

Examples of taglines:

Allstate Insurance: "You're in Good Hands with Allstate"
Avis Auto Rental: "We Try Harder"
VDSS: ""People Helping People"
CMSIP: "Better Health for Your Children, Peace of Mind for You"
UNCF: "A Mind is a Terrible Thing to Waste"
"I&R. Virginia's Information Resource"
"I&R: Connecting People and Resources"
"I&R: Bringing People and Needs Together"

Four "C"s of a good tagline:

1. *Creative*
2. *Catchy*
3. *Concise*
4. *Communicate your message*

Logos, taglines, phone numbers and web site address should be included on all print material, commercials, PSA's etc.

Marketing Materials: What tools are needed to communicate your message?

Brochures	Fact Sheets	Magnets
Bookmarks	Press Release	Newsletters
Wallet Cards	Information Kits/Small Bags	T-Shirts
Pencils/Pens	Small and Large Posters	Ad slicks

Information and Referral Marketing Plan

Page 3

In addition to those items listed, an informational video/infomercial can be produced to deliver your message to a wider audience.

Informational videos can be particularly effective if they are looped to run continuously and played at doctor's offices, information desk at shopping malls and community centers.

Informational videos are very popular because of the shift in our culture from print mediums as our primary source of information to an image-based message that is delivered through the Internet and television.

III. Media Relations

Obtaining media coverage is a guaranteed method to educate the community at very little cost. Start early and approach the media to establish a relationship, not just when you have a special event to promote.

Create partnerships to receive free or low cost advertising. Send key media contacts personal invitations to your kick-off event.

Key Activities to Media Relations:

- Call and introduce yourself and the program you represent. Be sure to call during "non-deadline" hours to get the best response
- Tie in local and national news to your program/service
- Send program updates and success stories regularly
- Send free tickets to kick-off/special events
- Get them involved by asking them to host or participate in the special event

- Be responsive to media calls
- Become a resource for community information

While the major news outlets may not always be interested in your story/event, keep in mind that some of your best media coverage may come from small television, community cable, weekly newspapers and magazines.

Agency, corporation, and school newsletters are another effective media outlet. Sending out information kits and press releases to these publications almost guarantees a story or advertisement.
(Media Tool Kit Appendix A)

Community Involvement

Another critical part of any promotional effort is the influence generated by community involvement. Statewide or national associations will serve as funders, material distributors, and word-of-mouth contacts. Direct mail campaigns using state agencies, government officials, municipalities, senior centers, local colleges, libraries, and faith-based organizations can prove to be effective messengers for your program.

Periodic updates can also be effective for state legislators along with invitations to tour local centers or participate in kick-off events. Getting an endorsement from a "VIP" can also get your program some well-deserved attention. Community involvement is particularly valuable when advertising dollars are limited.

IV. Identify Your Markets

Customer/Markets

A. Business-to-Public

➤ Callers and Potential Callers

Abused	Non-English Speaking
Advocates	Parents
Alzheimer's families	People in Crisis
Children of the Elderly	Prisoners
Depressed	Single Parents
Elderly	Substance Abusers
Financial Emergencies	Teenagers
Handicapped	Tenants
Immigrants	Those with illness

(Continued) Business-to-Public

Landlords	Victims of Crimes
Low Income	Victims of Disaster
Mentally ill	Wealthy
Middle-class	

B. Business-to-Business

➤ Callers and Potential Callers

Doctors	Psychiatrists
Human Services Agencies	Psychologists
Lawyers	Social Workers
Legislators	State Agencies
Libraries	United Ways
Nurses	

Perception Marketing

Legislators/State	Agencies
United Ways	Friends and Advocates
Professionals	Contractors

Existing Marketing Tools

Brochures	Fact Sheets
Newspaper filers	Public Service Announcements
Giveaways	Staffing Community Events (Booths)
Toll-Free Number	Cards
Web site	Press Releases
Phone Book	

V. Establish Your I&R Marketing Strategy:

A. Long-term Goal

Create image/perception of I&R in Virginia. Build an image as the health and human services connection, a human services call center, the education component of human services in Virginia.

Once Virginia's 211 is approved, that number must be distinguished from 911 by using the concept of a "a bridge to help" or lending a helping hand.

B. Short-Term Objective

Ex: Increase calls to the toll free number during the campaign launch (June-December, 2000)

C. Immediate Steps to Achieve Goals and Objectives

Step 1:

- Consider campaign message, tag line and logo

Step 2:

- Identify key markets with potential
- Use existing data base information
- Use census data

Information and Referral Marketing Plan

Page 7

Step 3:

- How to place marketing dollars to get the greatest impact
- What services will need to be out-sourced?

Step 4:

- Address the short-term objective
- Formulate kick-off campaign to meet short-term objective
- Develop campaign theme, unified message for multiple applications

Step 5:

- Determine materials to be used in the campaign
- Consider components and layering approaches

TV Commercials	Display setup for town halls, Post offices, etc.
Radio Announcements	School Campaign: Presentations by regions including educational books and posters, etc.
Transit Advertising	Posters, brochures in relocation packages, economic development organizations, community centers, etc.
Stickers for phones	Direct mail post cards
Highway Billboards	Direct mail letters from VIP's
Presentations/Speakers Bureau campaigns	Collaboration with state

Public Relations Component Possibilities

- Press Releases
- Staged events/Kick off events
- Activities to build the use of I&R

Step 6:

Address business-to-business perception audiences
Promote your Capacity as a "Value Added Service"

Lapel pins

Newsletters and Website Development

Statistical Services Products

Products brochure over and above the info services
(suicide prevention training, child care consortium)

Feature Articles in other newsletters

VI. Monitor Effectiveness

- Use Website survey or another vehicle on the web site
- Collect information from callers
- Map effectiveness

Information & Referral Retreat

MEDIA TOOL KIT



Pitch Your Story

Getting Your Story Told

- ◆ Contact media with good stories.
 - ◆ New program initiatives, updates on programs, success stories, and community projects.
 - ◆ Help them do their job and they will help you tell your story.
- ◆ Use as many media and communication tools as needed.
- ◆ Fact sheets, news releases, media advisories, brochures, and posters.
- ◆ Telephone, fax, mail, and e-mail information on programs.
- ◆ Post information on your Internet site.

The Ten Commandments of Media Relations

1. Be Open and Cooperative
2. Personalize Your Agency Develop
3. Media Contacts
4. Take Good Stories to Them
5. Respond Quickly
6. Never Lie or Say "No Comment"
7. If You Don't Know Say "I don't know, but I will find out." Make Sure You Find Out and Respond.
8. If You Screw Up, Confess and Repent
9. Know The Rules:
 - On the Record
 - On Background
10. Prepare

About News Releases

Whenever you issue a news release, you create the opportunity for free, widespread publicity for your organization. The more favorable mentions it gets, the better. News releases can also gain credibility for the program since the stories they generate carry the implicit endorsement of the publication or station carrying them.

News releases fall into several different categories

- | | |
|--------------------------------|---|
| <u>News stories:</u> | A straight- forward, description of an event such as the announcement of a new employer, a speech, or a new training program. |
| <u>Feature stories:</u> | Any story that goes beyond straight news coverage, usually taking a "human interest" approach. |
| <u>Editorial:</u> | An opinion or comment on a topic identified "For Editorial Comment" or as a "Letter to the Editor." |

Ten Commandments for a Good News Release

In developing a new release, writing style is not nearly as important as its structure or format.

The Ten Commandments for structuring news release:

1. News releases should be typed, double-spaced. Never submit a hand written release. Margins should be wide, an inch to and inch and a half on both sides and at the top and bottom. Indent paragraphs five spaces.
2. The name and address of the agency or organization sending the news release should be prominently displayed at the outset. Usually letterhead will suffice.
3. Always include the name and phone number of a specific person to be contacted for more information. This must be included either at the beginning or end of the news release.
4. Include a release date and time. If it is not time sensitive, you can use a standard phrase like FOR IMMEDIATE RELEASE.
5. At the top of your story put a suggested headline. This is a brief statement of the most important fact of the story.
6. Always make your lead, or first paragraph the most important item in the article. This is the "sales hook" for both the editor and the reader.
7. Follow up with the facts of your story in descending order of importance. Think of your story in terms of an inverted triangle.
8. If the main text goes on to another page, write MORE or CONTINUED at the bottom of the page to indicate that this is not the end.
9. At the end of the main text of the article, signal the end by putting in three pound signs, "###" or the word "END"
10. After the end signals, put any special additional information that doesn't fit elsewhere.

15 Rules for Writing News Releases

1. Write succinctly and clearly, Answer the questions: "who," "what," "when," "where," "why," and "how?"
2. Tell the main point of your story in the lead paragraph.
3. Limit your lead paragraph to one fact, person, or event.
4. Use the active rather than the passive voice (ex.: Not "The program is used by Ellis Industries," but "Ellis Industries uses the program.")
5. Use short sentences and simple words.
6. Limit paragraph to between three and five sentences.
7. Put your most important information first, and follow with information in a descending order of importance.
8. Identify each person and place clearly.
9. Avoid jargon, not all people are familiar with it.
10. Attribute all announcements to the highest ranking, most appropriate source, and be sure that the quotes are accurate.
11. Don't use an event several days or weeks old as your subject.
12. Type your press release double-spaced on one side of the page only, and number each page.
13. Include your name, and phone number, plus the release date (when you want the story to appear) at the top of the first page. (If the release date is immediate, then put "FOR IMMEDIATE RELEASE" instead of the date.)
14. Leave space between the heading, and the text of your release, and also leave wide margins to allow for editing
15. It's a good idea to personally deliver a news release at least once to every publication or station newsroom you use. The staff will remember you better than your signature, or your voice. This may help you get your story printed or aired.

Statewide Human Services Information and Referral System

Performance Indicators

The time period for collecting data will be **July 1, 2001 through June 30, 2002** unless otherwise specified.

Goal 1: Collect and maintain accurate and complete human resources data on a statewide basis.

Outcome: Human resource data will be current and accurate throughout the state.

Indicators:

1. 60% of agencies in database that have complete agency information.
Required agency information includes:
Name
Address
Phone Number
Person in Charge
Type of Agency
Hours of Operation
Programs Offered
Agency Description
2. 50% of programs in database that have complete core information.
Core information includes:
Hours
Eligibility
Intake Procedures
Service Area Description
Phone Number
Zip Code
Fees
Program Description
Statewide Keyword
3. 90 % of new agencies/programs entered in the database within four weeks of receipt of the survey information. This will begin 4/1/01
4. 50 % of programs in database show formal update within the past 12 months.

Performance Indicators

Page 2

Goal 2: Provide citizen access to information about resources throughout the Commonwealth.

Outcome: Inquirers will be linked with the appropriate resources to meet their needs.

Indicators:

1. The number of calls made to the regional information and referral centers.
Statewide Target: 115,000
2. The number of hits to the statewide internet database.
Statewide Target: 5,000
This site will be active April 1, 2001
3. The number of information and referral products distributed, including electronic products printed directories, specialized listings, and quick reference guides.
Statewide Target: 50,000
4. The number of outreach efforts including presentations, brochures, and other promotional materials.
Statewide Target: 10,000
5. The regional providers will complete follow up calls on 3% of the advocacy and referral calls received at the regional centers.
Statewide Target: 3% of the of the advocacy and referral calls.

Goal 3: Assist in planning functions by providing selected data to the Department of Social Services on a regular basis.

Outcome: The regional providers of information and referral services will maintain strict timely compliance with all reporting requirements and assist with planning functions by providing reports and data upon request made by the Department of Social Services.

Indicators:

1. The regional providers will submit quarterly reports no later than thirty days following the end of the last month in each quarter in the approved format.
2. Upon request, the regional providers will furnish the Department with electronic or other copies of its regional database.
3. The regional providers will comply with all requests for planning data made by the Program Manager or other authorized Department representative in a timely manner.

Performance Indicators

Page 3

Goal 4: Provide data to public and private agencies other than the Department of Social Services.

Outcome: Information and referral statistic will be provided to decision-makers in an effort to reduce the gaps and barriers to services in the Commonwealth.

Indicators:

1. The number of reports distributed to state, regional and local agencies, legislators and other interested parties.

Statewide Target: 100

Goal 5: Cooperate with the state administering agency

Outcome: The regional provider system will function as a single, seamless statewide system.

Indicators:

1. 100% of the regional contractors will participate in the Department of Social Services annual evaluation of services provided by the Statewide Human Services Information and Referral System.
2. 100% of the regional contractors will have a representative at 100% of the monthly meetings of the statewide contractors to plan and implement system goals.
3. 100% of the regional contractors will participate in training opportunities, special initiatives, studies and surveys sponsored by the Virginia Department of Social Services.

Goal 6: Seek funds from available resources.

Outcome: The statewide human services information and referral system will attain broad financial support.

Indicators:

The number of funding sources, other than Department of Social Services information and referral contracts, obtained by regional contractors to support services of the statewide human services information and referral system.

Statewide Target: 18

Performance Indicators

Page 4

Goal 7: Maintain effective relationships between the system and state and local agencies and public and private organizations

Outcome: State and local agencies will utilize the statewide human services information and referral system to facilitate their outreach efforts

Indicators:

1. The number of signed agreements with local, regional and state agencies.
Statewide Target: 20
2. 100% of the 11 Departments of the Health and Human Resources Secretariat will be contacted at least twice annually by designated representatives of the regional providers to assess the quality of the relationship between each department and the statewide human services information and referral system
3. The number of formal requests received from other agencies to use I&R toll free number.
Statewide Target: 3

Goal 8: When feasible, establish satellite offices or cooperative agreements with local information and referral and resource and referral groups.

Outcome: Residents of the Commonwealth of Virginia will attain improved access to Information and referral services

Indicators:

The number of partner sites under formal agreement with the regional providers.
Statewide Target: 20

IRis Tech Support Policy

1. Back up regional databases at least weekly and maintain at least the current back-up and 2 prior ones, with the next to most recent stored off-site.
2. Contact Statewide Database Users with the problem in an effort to tap the expertise of those individuals and other staff members at those centers who may have had similar problems.
3. E-mail 2 national IRis list serves to access their knowledge of IRis in an effort to resolve problem. The addresses to join the two groups are:

<http://www.egroups.com/group/iris-users>

<http://lyris.unc.edu/cgi-bin/lyris.pl?enter=IRis>

4. The respective addresses to e-mail the two groups are:

Iris-users@egroups.com

iris@listserv.unc.edu

4. If the problem is a LAN or Networking problem contact the Virginia DSS Help Desk at
Telephone: 800-223-8846.
5. If above steps do not solve the problem and it is one that interrupts your delivery of I&R Services notify Sandra King with the Information & Referral Center in Roanoke about accessing the Statewide I&R IRis Technical Assistance (TA) Fund. She will advise you on procedures for arranging payment through the IRis TA fund.

Telephone: (540) 982-0231, ext. 3600

6. After approval you may contact the appropriate vendor. Obtain a written quote on the cost of fixing the problem before proceeding. Have the quote forwarded to Sandra at

e-mail address: Sandra D. King - sd450@piedmont.dss.state.va.us

and obtain Sandra's approval for the expenditure before proceeding.

7. The Statewide I&R IRis Technical Assistance Fund does not cover the costs of local LAN issues. These are the responsibility of the respective center.

8. IRis Software – Cathy Richie

Web site: www.suncoastprograms.com/iris

e-mail address: cathy@suncoastprograms.com

Telephone: 1-800-335-8817 or (561) 641-2897

9. Partners taking phone calls on behalf of the Statewide I&R System should notify the appropriate person at their regional I&R center. That person may implement the above procedures on their behalf if necessary.

*System Standard: field content and format is mandated by the Virginia Statewide I&R System

IRis Minimum Computer Requirements

Software: Contractors and sub-contractors shall use IRis 3.0 Information & Referral software.

Source: <http://www.suncoastprograms.com/product311.htm>

Refer to this site for updates.

Workstation Requirements: Client side -

- 300MHz Pentium II or Equivalent (AMD K6-2/Celeron) - 500MHz or better recommended.
- 32M-memory minimum, 64-128 recommended depending on advanced features used.
- A minimum of hard drive space is required, as all data files are server-located. Windows should have at least 100M of space for temporary files and swap file used, so if this requirement is met, IRis will be fine.
- Operating System: Windows 98/98 SE/ME/NT 4.0+/2000/XP. IRis 3.0 will run on Windows 95 if system also has Internet Explorer 5.0+ installed.
- Mouse, monitor and keyboard.
- Sound card and speakers are required for IRis Text-to-Speech (TTS) features. If TTS is enabled, more memory will be required.
- Internet connection and web browser (Internet Explorer, Netscape Navigator, Opera, etc.) and E-Mail Client (Outlook, Outlook Express, etc.) required for certain advanced features.
-

Server side:

If IRis 3.0 server installation will also be used as a workstation, it will need to meet all of the client requirements as well as having a recommended amount of hard drive space. (See [Storage Requirements](#) below.)

Other options:

If you are using a file server with an OS other than Microsoft Windows for an IRis server installation, you will not be able to use that server as an IRis workstation. To install to a non-Windows based server, simply copy the file images from the provided CD to the file server.

IRis 2.3 requires a minimum of 45 mgs; IRis 3.0 will require a little more. If you're tracking clients, resources, referrals, contacts, services, volunteers -- basically everything -- you'll need a minimum of 500 Mgs -- it depends on how much you're tracking and, therefore, the size of your database. Basically, the bigger your database, the more hard drive space you should have -- and as always, the "bigger is better" rule applies.

However, you'll also have archiving abilities, or you can always clean out and remove old data you don't need anymore if you don't want to upgrade your hard drive space.

IRis Minimum Computer Requirements

Page 2

Storage Requirements:

IRis requires 45 megabytes free hard disk space to install. After installation it will occupy about 30 megabytes. As you add contact/caller records and agency/service program information you will need more space. Use the following formula to calculate the minimum disk space you should have.

These are approximations:

- 30 Megabytes for basic installation
- 3 megabytes hard disk space for every 1,000-service programs added.
- 1.5 megabyte for every 1,000 contact (call) records entered.
- Additional megabytes for large reports and lists sent to disk files.

Example: If your agency maintained 2,000 service programs and received 50,000 calls per year you would use approximately this much hard disk space:

2,000 programs	6 megabytes
50,000 calls	75 megabytes
Original installation	30 megabytes
Reports, lists, temporary files	10 megabytes
	121 megabytes MINIMUM for one year's records

If you imported agency/service program information from another IRis site you could easily add an additional 10 to 15 megabytes of hard disk usage. You should estimate how many caller records you will take in a year, multiply that by the number of years of caller's history you would like to keep. Most sites want at least a year or two.

IRis can handle approximately 2 million caller records in one database. For I&Rs that receive 100,000 calls a year that would be 20 years of history. If you need to go above that you should "archive" off the older records into a separate sub-directory.

System Capacities:

IRis comes in both Single-User and Multi-User versions. Other than the number of concurrent Users, the features in both versions are the same. Multi-User IRis allows an unlimited number of concurrent users. In reality you will find that this is limited only by the overall speed of the file server (main computer) and its ability to service the workstations. The limits of IRis are the limits imposed by the language itself.

IRis 3.0 is written using the latest of the development environment available at design time. The majority of the program was written in Microsoft Visual FoxPro 7.0. Other components were written using components of Microsoft Visual Studio 6.0.

IRis Minimum Computer Requirements

Page 3

The physical file limits of IRis are as follows:

Maximum number of caller records: 1 Billion records

Maximum number of any single type of record: 1 Billion records

Maximum file size of any single database: 2 Gigabytes (approximately 2 billion characters)

Please note that to reach the 2-gigabyte file size limit on a single database you would need to have entered several million contact/caller records. Since any referrals, indexes and such are stored as separate files you would fill a hard disk of approximately 3 to 4 gigabytes. At this point you would probably want to archive or remove some of the older records.

June 2002

SAMPLE APPROVAL LETTER FOR LINE-ITEM CHANGES

NOTE: It is recommended that this information be sent by certified/express mail in which proof of delivery may be secured.

April 22, 2002

Ms. Kittie H. Winston, Program Manager
Statewide Information & Referral Program
Department of Social Services
Theater Row Building
730 East Broad Street, 9th Floor
Richmond, Virginia 23219-1849

Dear Ms. Winston:

The Faithful Community Services, Contract #COM-00-77-333, requests permission to make line-item changes as required in Section 8.19.1 of the Request for Proposal (RFP) which states: "Deviations from approved line-item budget of more than \$100 in any line-item shall be submitted in writing" Therefore, I am requesting approval based on the following line-item changes:

SURPLUS FUNDS FROM:

Postage	\$150.00
Rent & Utilities	200.00
Software	<u>200.00</u>

TOTAL	\$550.00
--------------	-----------------

TO LINE ITEMS:

Printing	\$2,150.00
Supplies	700.00
Travel	<u>500.00</u>

TOTAL	\$3,150.00
--------------	-------------------

I have enclosed two (2) original letters for your signature, and two (2) original copies of the **revised budget** to reflect these line-item changes. It is my understanding that upon approval/disapproval, one set will be returned to me for my files.

If you have questions, please contact me at (540) 245-1598.

Sincerely,

Jane Doe
Executive Director

JD/cpc

Enclosures

Approval:

Kittie H. Winston, Program Manager

Date

Disapproval:

Kittie H. Winston, Program Manager

Date

PROCEDURE FOR SETTING UP A CONFERENCE CALL

1. Call the Department of Information Technology (DIT) on 371-5574 at least five days in advance. (DIT can do the same day, but they prefer advance notice)
2. Specify the date and the time you want the call to take place.
3. Specify how many people will be involved and the number of local, long distance or toll free lines you will need.
4. Decide who will lead the conference call. For the I&R Directors, the Chairperson will lead the conference call.
5. Send an e-mail to each participant giving them the telephone number and pass code.

THE SETUP

1. If the participants are provided with the phone numbers, they have to pay for the long distance charges.
2. If the Department calls and receives the phone numbers they pay the long distance charges and any toll free number fees.

CHARGES

Bill the conference call to the Program Manager's telephone number (692-1859).

The service charge is six cents (\$.6) per minute per line.

The long distance charge is fourteen cents (\$.14) per minute per line.

The toll free number charge is sixteen dollars and seventy-eight cents (\$16.78) per line per hour.

BUDGET - SUMMARY OF VDSS FUNDS AND MATCH FUNDS

FROM ____/____/____ TO ____/____/____ CONTRACTOR NAME _____

BUDGET CATEGORY	PROGRAM COMPONENT	TOTAL VDSS REQUEST	TOTAL MATCH AMOUNT
SALARIES			
EMP. BENEFITS			
POSTAGE			
RENT & UTILITIES			
EQUIPMENT			
PRINTING			
CONSUMABLE SUPPLIES			
TRAVEL			
OTHER			
TOTAL REQUESTED FROM VDSS			

	AMOUNT	PERCENT OF BUDGET
TOTAL REQUESTED FROM DSS		
SUPPLIED FROM MATCH		
TOTAL PROJECT BUDGET		100%

BUDGET - SALARIES AND EMPLOYEE BENEFITS

FROM ____/____/____ TO ____/____/____ CONTRACTOR NAME _____

SALARIES STAFF POSITION	HOURS PER WEEK	% OF TIME ON PROJECT	ANNUAL SALARY	AMOUNT REQUESTED FROM VDSS
1.				
2.				
3.				
4.				
5.				
6.				
TOTAL SALARIES REQUESTED FORM VDSS	-----	-----	-----	

EMPLOYEE BENEFITS

NAME OF BENEFIT	STAFF POSITION (# ABOVE)	% OR RATE	ANNUAL COST	AMOUNT REQUESTED FROM DSS
FICA				
PENSION/RETIREMENT				
HEALTH INSURANCE				
WORKER'S COMPENSATION				
UNEMPLOYMENT				
OTHER (SPECIFY)				
TOTAL EMPLOYEE BENEFITS REQUESTED FROM VDSS	-----	-----	-----	

BUDGET - PERSONNEL EXPENSE FORM

AGENCY/PROGRAM NAME _____ CONTRACT # _____ FED ID # _____

[illegible]

BUDGET - OTHER PROPOSED EXPENSES

FROM ____/____/____ TO ____/____/____ CONTRACTOR NAME _____

LINE ITEM	JUSTIFICATION (How costs were determined)	PROPOSED VDSS FUNDS
<i>POSTAGE TOTAL</i>		
Administrative		
Program		
<i>RENT AND UTILITIES TOTAL</i>		
Rent		
Utilities		
Telephone		
<i>EQUIPMENT TOTAL</i>		
Equipment Purchase		
Equipment Rental		
<i>PRINTING TOTAL</i>		
Administrative		
Program		
<i>CONSUMABLE SUPPLIES TOTAL</i>		
Office		
Program		

(continued on Attachment B, Page 5)

BUDGET - OTHER PROPOSED EXPENSES

FROM ____/____/____ TO ____/____/____ CONTRACTOR NAME _____

LINE ITEM	JUSTIFICATION (How costs were determined)	PROPOSED VDSS FUNDS
TRAVEL TOTAL		
Administrative		
Program		
OTHER TOTAL		
Insurance		
Professional Fees		
Client Fund		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		

TOTAL AMOUNT REQUESTED FROM VDSS _____

BUDGET - Match Documentation

FROM ___/___/___ to ___/___/___ Contractor Name _____

BUDGET CATEGORY	BRIEF DESCRIPTION	SOURCE	CASH	IN-KIND VALUE	TOTAL MATCH
Salaries					
Employee Benefits					
Postage					
Rent and Utilities					
Equipment					
Printing					
Consumable Supplies					
Travel					
Other					

TOTAL AMOUNT SUPPLIED FROM MATCH _____

WORK PLAN

(Please make additional copies as needed)

ATTACHMENT A

FROM ___/___/___ **TO** ___/___/___

Contractor Name: _____

GOAL #__:

OBJECTIVE #__:

DESIRED RESULTS:

STRATEGIES (METHODS) AND ACTIVITIES (ACTION STEPS)	STAFF RESPONSIBLE	EVALUATION MEASURES	BEGIN DATE	END DATE

STATEWIDE HUMAN SERVICES INFORMATION & REFERRAL SYSTEM

RESPONSE TO JLARC RECOMMENDATION February 2002

The Virginia Department of Social Services and the six regional contractors operating Virginia's Statewide Human Services Information and Referral System are pleased to report to the General Assembly on progress since the Joint Legislative Audit and Review Commission report in November 1999 (House Document No. 21).

Recommendation 1: The regional information and referral centers should emphasize community outreach: (1) to ensure that service resources available in each locality within their regions is included in their I&R materials and computer database, and (2) to develop relationships that will foster local partnerships.

STATUS: Regional contractors have expanded the numbers of local resources within their databases and reached out to local resources that show interest in local partnerships. The Central and Northern Virginia regions have each added local partners to assist in delivering information and referral services and identifying community resources: the Danville and Martinsville Contact crisis lines and the City of Falls Church Division of Housing and Human Services. The Southwestern region is presently negotiating with a potential local partner.

E-mail listservs were launched in several parts of the State in an effort to provide a tool for locating resources for hard-to-serve clients. These listservs not only help provide essential resources for persons in need, but they also offer a means of collaboration and communication between human service organizations and of identification of services to be added to databases. Usage of the listservs has been growing.

On a statewide level, the Information and Referral System has entered into several partnership agreements with other state initiatives, some temporary and some ongoing:

- Virginia Department for the Aging
Virginia Insurance and Counseling Assistance Program (VICAP)
- Virginia Department of Health
Maternal and Child Health
Newborn Hearing Screening
“Not Me, Not Now” Teen Abstinence Program
- Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services
Infant and Toddler Connection
- Virginia Department of Rehabilitative Services
Virginia Assistive Technology System (VATS)
- Virginia Department of Social Services
Virginia Department of Medical Assistive Services
Family Access to Medical Insurance Security Plan (FAMIS)

- Virginia Health Care Foundation
Senior Navigator Project

Recommendation 2: Regional center staff should more carefully review the service descriptions that are received to ensure accuracy and completeness. Descriptions received from agencies offering similar programs should be carefully compared to determine whether important programs have been omitted. Follow-up calls should be made to service providers to verify the accuracy of any changes the regional center staff intend to make in resource descriptions.

STATUS: Staff at the regional centers examined procedures for ensuring accuracy and completeness of the database. Systems have been put in place to survey listed agencies at least annually to update database information. Agencies submitting updates are asked to sign off on the changes.

The combined databases of the six regional centers contain over 5,200 agencies with over 12,700 specific services. Keeping this much information updated and properly classified or indexed is labor-intensive. Because the regional centers have a combined total of less than 20 staff to assist inquirers, do outreach, maintain databases and administer the program, they must find ways to work smarter. Centralized updating is one such initiative.

The regional providers have contracted with the Southwestern Virginia I&R center to review many of the state agency listings on the Statewide I&R System web site. Information identified as missing on these agencies or their local offices will be added. These procedures will test the viability of a process to centralize updating of information on State services. If successful, other types of services will follow.

The I&R Centers have recommended and implemented the following to ensure accuracy and completeness of data:

- Developed a template for data entry to ensure all information is included in a consistent manner.
- Enlisted staff at agencies, such as Agencies on Aging, with expertise in human services topics to review the database for completeness and accuracy.

Recommendation 3: The regional center directors should consider drafting a letter to send to each of the local telephone companies operating within their regions. The letter would ask the local telephone companies to include the statewide toll-free number for information and referral as a non-emergency contact on the page that displays the 911 number and other emergency numbers. Each letter should be signed by the Commissioner of the Department of Social Services and an official of the regional information and referral center.

STATUS: Letters were completed, signed by Commissioner and Executive Directors of information and referral centers and mailed on April 18, 2000 to all telephone advertising executives of telephone companies serving the Commonwealth of Virginia. Response was negligible. Decisions on organizations to place on the Emergency Services page rests entirely with local telephone companies.

Recommendation 4: The Department of Social Services should appoint a task force to study the feasibility and cost-implications of implementing 2-1-1 in Virginia. The statewide adopting of 2-1-1 has the potential to significantly improve the visibility and utilization of information and referral services in Virginia.

STATUS: The Federal Communications Commission unanimously voted on July 21, 2000 to designate 2-1-1 as a national three-digit number for access to community information and referral services. The petition was presented by the Alliance of Information and Referral Systems (AIRS), United Way of America, United Way 2-1-1 (Atlanta, Georgia), United Way of Connecticut, Florida Alliance of Information and Referral Services, Inc. and Texas I&R Network of 2-1-1. The Virginia State Corporation Commission has received inquiries from outside the State and is interested in the implementation of this number.

The Virginia Department of Social Services has asked the regional center directors to take the lead in exploring Virginia's response. They are cooperating with the United Way of the Roanoke Valley under a grant from United Way of America to plan a 2-1-1 crisis information and referral response during times of disaster. Virginia and Texas were selected as the pilot sites. A planning meeting is scheduled in March 2002 to review requirements of the grant and develop ideas and plans for disaster response. Speakers from AIRS, the Alliance of Information and Referral Systems, and from operating 2-1-1 services will stay over a second day to introduce 2-1-1 to participants: standards, accreditation and the 2-1-1 concept. Participants will include public, military, and not for profit I&R providers not currently part of the Statewide System, including United Ways, Area Agencies on Aging, and crisis lines, as well as representatives of the State Corporation Commission, the Office of Emergency Management and the Department of Information Technology. These meetings will identify interested parties and avenues to explore in determining possible implementation of 2-1-1 in Virginia.

Recommendation 5: The Department of Social Services should ensure that a State-level web site for Information and Referral Services, with links to the regional I&R centers, is developed and implemented without delay. This site should have a mechanism for providers and the public to provide comment about the site or to provide feedback about incorrect service information or additional services that are not listed. In addition, this

web site should include links to other locally sponsored and specialized I&R web sites to increase the awareness of service resources across the Commonwealth. The department should ensure that all local, regional, and State public and private human resource agencies are notified about this new resource.

STATUS: United Way of Richmond and SunCoast Custom Programming and Web Design developed and are hosting the statewide I&R web site. The site was launched on February 2, 2001. The web site address is www.irissoft.com/rich. It can also be reached through <http://www.dss.state.va.us/community/iandr.html> .

The website permits searches by keywords, agency name or program name, and by zip code or city. The site also has a link that enables agencies and programs to send updated or new information to the database manager for inclusion in the database. The site has had 9,852 visitors since February 2, 2001.

A translation feature has been added to the statewide site that can translate the opening parts of the site into French, German, Italian, Portuguese, and Spanish. The site also incorporates a means for the customer to contact the Virginia Information & Referral System to provide comments or ask questions regarding the site. The customer can provide feedback as to the correctness of information contained within the site, as well as comments as to its “user-friendliness”. The Statewide site provides related links to AIRS (Alliance of Information and Referral Systems), Infant & Toddler Connection – Babies Can’t Wait, Virginia Board for People with Disabilities, Virginia Department of Social Services; and Virginia State Government – VIPNET.

Notification of this new resource has been publicized Statewide by listing the site address on promotional materials, billboards, listservs, quick guides, etc. Also, through contacts made by the Directors of each Regional Center, members of the Secretariat of Health and Human Services have been provided with information regarding the statewide web site.

Recommendation 6. The Department of Social Services, in consultation with regional center directors, should redesign the unmet needs report and the locality origination report that are submitted to the department to ensure that the information is meaningful and useful for planning human service delivery at the local, regional, and State levels.

STATUS: Identification of Unmet Needs and the locality of origination of inquiries are fundamental to the responsibilities for assisting with planning and allocating human services resources set forth in the *Code of Virginia* § 63.1-314.1. The ability to provide this information is also one of the National Standards for 2-1-1 Centers.

Starting with fiscal year 2000-2001, the Statewide I&R System changed the Unmet Needs report to display the top ten categories of unmet needs, arranged in descending numerical order, with a total of all reported. This helps to focus attention on areas of higher need and removes the statistical uncertainty of very small numbers.

Regional center directors have an additional Unmet Needs Report for internal analysis that shows details from the contact narrative. They also have the ability to restrict either report to those unmet needs identified in initial contacts or in follow-up calls, where inquirers report community resources unable to meet their needs. The report based on follow-up calls covers fewer contacts than the original report on all inquiries since centers follow-up on a 3% sample of those whose initial inquiries were classified as emergencies or referrals. This smaller sample would be balanced by the benefit of excluding inappropriate contacts and those where the I&R Specialist was unable to find a resource within the database.

All reports can be easily set to cover an entire region or a particular jurisdiction, depending on the request for information.

Recommendation 7: The General Assembly may wish to direct the Secretary of Health and Human Resources to refer all new requests for information telephone lines or directories to the Department of Social Services to be reviewed to see if the statewide information and referral system could provide the services in a more cost-effective manner.

STATUS: In the absence of such a directive from the General Assembly, the Secretary of Health and Human Resources asked each agency within his Secretariat to designate a contact person for Information and Referral services. He called a meeting in October 2000, where he and the I&R Project Manager from Virginia Department of Social Services introduced them to the Statewide I&R System and possibilities for restructuring. Each of the regional centers is maintaining contact with representatives of two agencies to determine I&R needs and possibilities for collaboration.

In addition, six of the 13 agencies in HHR have partnered, either formally or informally, with the Statewide I&R System to distribute information in a cost-effective manner.

Those agencies and the programs include:

- Virginia Department for the Aging
Volunteer Insurance and Counseling Assistance Program (VICAP)
- Virginia Department of Health
Maternal and Child Health
Newborn Hearing Screening
“Not Me, Not Now” Teen Abstinence Program

- Virginia Department of Medical Assistance Services
FAMIS
Managed care programs for Medicaid
- Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services
Infant and Toddler Connection
- Virginia Department of Rehabilitative Services
Virginia Assistive Technology System (VATS)
- Virginia Department of Social Services
Cooling Assistance
Welfare Reform

Recommendation 8: The Department of Social Services, in consultation with the regional center directors, should develop a mechanism for increasing the awareness of local, regional, and State planners and decision makers of the availability and potential uses of the service resource information and reports generated by the regional centers.

STATUS: The ongoing liaisons within the Secretariat of Health and Human Services described in the response to Recommendation 8, are one mechanism developed to increase awareness. These liaisons discuss service resource information and reports generated by the regional centers.

The HHR Secretary has used the Statewide I&R System to develop the Quick Guide for Youth Services for the last two Right Choice for Youth Conferences.

The regional I&R contractors have recommended that a summary of the aggregated Problems/Needs report for the Statewide I&R System be posted on the VDSS web site. This would be a first step in keeping with Executive Order 65(00) accelerating and implementing electronic access to government.

In the fall and winter of 2000, regional contractors, or their local partners, contacted most Directors of local Departments of Social Services and County or City Administrator in their respective regions to update them on, or to introduce them to, the Statewide I&R System. Where requested, these calls were followed by mailing a detailed Problems/Needs Report for the region, along with a brochure, the Director's business card, a regional brochure, and a Statewide I&R note pad and pen.

The Statewide I&R System has found that public information efforts have increased the use of the resources within the statewide database on the web (www.irissoft/rich).

Recommendation 9: The DSS should require regional I&R centers to request certain basic demographic information about all callers.

STATUS: Virginia's I&R contractors have discussed this request and are now recording the zip codes of callers seeking referrals as basic demographic data. The contractors believe that collecting more detailed demographic data on callers would result in misleading data and interfere with one of our four main purposes as outlined in §63.1-314.1 of the *Code of Virginia*: to link citizens needing human services with appropriate community resources to satisfy those needs.

Regional center experience has been that callers are reluctant to provide more detailed demographic data not directly related to their service needs unless the I&R center spends time justifying such requests. Centers often have calls waiting in a queue or return busy signals to callers, so time devoted to more detailed data collection and to its justification delays services to other callers.

The amount of demographic data collected varies across the nation from none being collected with anonymous calls to detailed data for the centers that do case management. While professional standards do not require any specific demographic information to be collected, the standards do state *that the primary goal of data collection is to garner enough information about inquirers to help them address and/or resolve their problems. Inquirers have the right to withhold information. While data collection is important, the delivery of quality services to the inquirer is paramount.*

* Wording in italics is quoted from Standards for Professional I&R, AIRS 2000.

There is also growing realization that telephone calls are only one means by which Virginia's citizens access the I&R System's human services data. The statewide web site shows increasing utilization. Other agencies use directories, either in print or in electronic formats, to give their clients access to our data. Demographic data on those who access our data through these means are not captured by regional centers.

The regional I&R centers do collect additional information for some contracts such as those needing Newborn Hearing Screening. This is specified in procedures approved by the Virginia Department of Health. A center may also elect to collect additional information for the locality it serves, usually at the request of a local agency and for a limited period of time. (The center in Lynchburg tracked literacy calls for a county Literacy Council.)

Recommendation 10: The DSS should work with regional center staff to design outcome measures that are tied to the 4 goals of the I&R system. Funding received by the regional centers should be adjusted when these outcomes are not met.

STATUS: The Statewide I&R System has identified 21 possible indicators related to the eight responsibilities of Regional Providers identified in §63.1-314.6 of the *Code of Virginia*. Since the Virginia Department of Social Services and regional providers have little basis for picking numerical targets, the Statewide I&R Centers will track the indicators and determine benchmarks during Fiscal Year 2002. This will allow refining the number of indicators and setting realistic # and % for measuring outcomes. It will also allow time to identify issues such as overlooked outcomes, inadequately defined indicators, cumbersome procedures and analysis and reporting dilemmas.

As a further example of efforts to focus activities on outcomes most closely related to the mission of the I&R System, the Northern Virginia Regional Commission has undertaken a Continuous Quality Improvement (CQI) process. Under the overall goal of "Each citizen can access human services when needed" four outcomes with related outputs and activities were identified. Progress against these internal benchmarks are measured regularly.

Recommendation 11: The Department of Social Services should determine the extent to which Temporary Assistance to Needy Families funding can supplement or replace Social Services Block Grant (SSBG) funding for information and referral operations. The use of TANF funding would allow for increased development of the information and referral system and possible save SSBG funding for services that have no other funding sources.

STATUS: The Virginia Department of Social Services staff have explored using TANF funding for the Statewide Information & Referral Program. The TANF official, Mr. John Schwartz, provided the following comments via e-mail:

“A Statewide Information & Referral system in which the public (including a potential recipient) or a state worker (from some program) would access is an activity while in principle could help accomplish a TANF purpose, it must be cost allocated according to a benefiting program cost allocation methodology.

Since there is a chance that some TANF funds could be used for this effort, Virginia should work with the Regional Office of Cost allocation to discuss the details of the program in order to arrive at a way of attributing allowable costs to the benefiting program.”

Budget Staff will need to work with the Regional Office as suggested by Mr. Schwartz to develop a cost allocation plan to use TANF funds for the Statewide Information & Referral Program.

Recommendation 12: The Department of Social Services should ensure that adequate resources, including staffing for database coordination, are available to fulfill the Department’s statutory duties for the I&R program.

STATUS: The Virginia Department of Social Services secured a Memorandum of Understanding with the Health Department in the amount of \$20,000 for a part-time Agency Management Analyst (Database Coordinator) position. The Program Manager submitted to the Director and Commissioner a position description and request for approval to fill this position.

Recommendation 13: The Department of Social Services should issue requests for proposals in a more timely manner, particularly when significant changes need to be made in information and referral operations.

STATUS: The Statewide Human Services Information & Referral staff will work closely with the Department of Social Services' Office of General Services to ensure compliance with the *Code of Virginia* and ensure appropriate timelines are provided in the Request for Proposal (RFP) process. Cooperation at all levels within the Virginia Department of Social Services is needed to ensure timely distribution of the Request for Proposals.

Recommendation 14: In compliance with statutory requirements, Department of Social Services staff should complete financial audits and program monitoring to assess the performance and success of the I&R program. These activities should conform to standard fiscal and program auditing procedures. At a minimum, DSS staff should complete at least one site visit to each regional I&R center each year. An annual written evaluation of the program should be submitted to the Commissioner for the Department of Social Services.

STATUS: The Virginia Department of Social Services is committed to satisfying the requirements as set forth in the *Code of Virginia*, including reviewing audit reports. Audits have been received from all of the I&R Centers and have been forwarded to internal audit for review.

The Program Manager for the Statewide Information and Referral Program will perform an annual site visit to each regional center to complete monitoring and evaluation of the program. An annual report has been completed and submitted to the VDSS Commissioner.

Recommendation 15: In compliance with statutory requirements, the Department of Social Services should develop an aggressive statewide effort designed to promote the information and referral program.

STATUS: The Virginia Department of Social Services staff will work with the I&R Regional Directors in developing, coordinating, and implementing a statewide marketing campaign designed to promote the Statewide Information and Referral Program. A marketing plan has been developed along with the tag line: “Virginia’s I&R: Information **YOU** Can Use”. Promotional materials have been ordered and distributed to each of the I&R regional centers. Contacts are being made for outreach efforts in the I&R regions. Target audiences of the outreach efforts will include: human service delivery systems, State agencies, local departments of social services, the business community, counseling services, crisis pregnancy centers, the school system, community colleges, emergency rooms, hospitals, and public libraries. VDSS communications staff will look with I&R Directors in developing an aggressive statewide effort for 2002.

Recommendation 16: The Department of Social Services should ensure that staff members are not appointed to boards that have the potential to compromise objectivity in performing official duties related to information and referral services.

STATUS: The Program Manager submitted a resignation effective October 7, 1999 to the Community Resources Board of the United Way. The Statewide Human Services Information and Referral contractors have reaffirmed their commitment to avoid even the appearance of conflict of interest.

Recommendation 17: The General Assembly may wish to amend the *Code of Virginia* in Section 63.1-314.2-4 to change the composition and appointing authority for the Human Services Information and Referral Advisory Council to improve its effectiveness.

STATUS: This recommendation suggests that the General Assembly may wish to amend the *Code of Virginia* to change the composition and appointing authority for the Human Services Information and Referral Advisory Council to improve its effectiveness. Two options were recommended: the first option takes the form of a traditional advisory council. It closely resembles the recommendations contained in the JLARC study. The second option responds to Executive Order 65 issued by former Governor James S. Gilmore on May 24, 2000. It directs the implementation of “electronic government” in Virginia. Option two relies on electronic advisory council meetings instead of the traditional face-to-face advisory council meetings.

In order to implement recommendation 17 from the JLARC study, the General Assembly would be required to amend the *Code of Virginia*. Six sections of the *Code* are relevant to the Human Services Information and Referral Advisory Council. § 63.1-314.2 creates the Council. § 63.1-314.3 provides for members’ terms and vacancies. § 63.1-314.4 describes the duties of the Council. § 63.1-314.5 outlines the duties of the Department of Social services with respect to the Council. § 63.1-314.6 lists the duties of the regional providers. § 63.1-314.7 creates a technical assistance committee.

In its review of the statewide human services information and referral program, the Joint Legislative Audit and Review Commission raises three concerns about the structure of the Human Services Information and Referral Advisory Council. They relate to the size, composition, and the appointing authority for the Council. These concerns relate to § 63.1-314.3 of the *Code of Virginia* which provides for members, terms and vacancies. This section of the *Code* requires amendment in order to implement recommendation 17.

Recommendation 18: The General Assembly may wish to consider whether the current structure for providing statewide information and referral services is the most effective mechanism to ensure that all citizens across the Commonwealth have access to information concerning available public and private human services. The General Assembly should request that the Secretary of Health and Human Resources develop a proposed approach for restructuring the State's information and referral services, to be presented to the House Appropriations and Senate Finance Committees by October 2000.

STATUS: "A Proposed Plan for Restructuring the Commonwealth's Information and Referral Services" was presented by former Secretary Claude A. Allan, Health and Human Resource, dated December 20, 2000. The plan was presented to the House Appropriations and the Senate Finance Committees.

**A PROPOSED PLAN
FOR RESTRUCTURING
THE COMMONWEALTH'S
INFORMATION AND REFERRAL SERVICES**

Presented to

*The House Appropriation Committee
&
The Senate Finance Committee*

Presented by

*Claude A. Allen
Secretary of Health and Human Resources
December 20, 2000*

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Preface

The Human Services Information and Referral (I&R) System in Virginia has existed for about a quarter of a century. The *Code of Virginia* (§63.1-314.1 ff) assigns three key stewards responsibility for this system: the Department of Social Services has administrative oversight; the Human Services I&R Advisory Council provides policy guidance; and the regional human services I&R centers form the service delivery structure to implement the program in six regions across the state. The budget for the system was approximately \$861,000 in FY 2000.

The Joint Legislative Audit and Review Commission's (JLARC) recent study (2000) concluded that the Virginia system is still "not well developed." A low priority attached to information and referral services, lack of public awareness, and insufficient funding are the three principal reasons the study lists for the system's current condition. The study also highlighted expectations of reaching into localities to build more extensive networks that could provide information and referral services more effectively.

As a result of the JLARC study, the House Appropriation and Senate Finance Committees requested the Secretary of Health and Human Resources (hereafter referred to as the Secretary) to provide a "proposed plan for restructuring the Commonwealth's information and referral services" (HB 30, Chapter 1073, Item #293 E). The appropriation language directed the Secretary to address the following issues in proposing a plan:

- (i) how the advisory council should be reconfigured;
- (ii) the structure that should be used to implement information and referral services statewide;
- (iii) the feasibility of using 211 as a non-emergency information number, with a specific proposal for developing and implementing 211 in a way that appears to be cost-effective;
- (iv) a proposed plan to develop and implement a state-level, web-based site with links to all local, regional, and state information and referral resources across the Commonwealth; and
- (v) other issues as may seem appropriate.

In developing his plan, the Secretary is requested to "receive input from the Department of Social Services, the regional information and referral centers, other health and human resources agencies that provide information and referral services, and from the Department of Information Technology." A market-oriented proposal is given in response to these requests.

Executive Summary

The Commonwealth's Information and Referral (I&R) System is at a crossroads in its history. This plan seeks to improve the service delivery component in the system. This plan is proposed as a two-year pilot. It transitions the current program from one that is heavily reliant on public funds to a more self-sustaining, market-oriented system. Revenue generated in this approach comes from the value attached to the type of information the system produces, as well as a potential market it creates for human service providers. The proposal outlines a new direction that could make the system more available to citizens, more useful to resource providers and new stakeholders, and more market-oriented to future investors.

It builds upon the effectiveness study recently completed by the JLARC (1999), which found that the system is ineffective. Based on its findings, additional information was solicited from the Alliance of Information and Referral Systems (AIRS), a national professional association for public and private I&R programs. Structured interviews and/or discussions were conducted with I&R systems in 11 states to gather operational data. These interviews indicated that almost all I&R programs in other states are not well developed as a statewide system – most are regional or local. Furthermore, no state is directly providing comprehensive I&R services. Only Connecticut makes a sizable financial commitment to the I&R system. Finally, although the interviews were valuable for collecting operational information, no hard data was available for making rigorous cost-estimates.

There are several goals to reforming the existing system. The current system is unattractive as a self-sustainable program. There is the likelihood that the current structure will continue to require more and more public funds to achieve heightened expectations placed on it. The low volume and income levels of customers, the number of investors, and the limited points of access to information, all contribute to an uninviting picture. The current system is unlikely to draw new private providers, diverse stakeholders, a customer volume from all income levels, nor arouse the interest of entrepreneurs to assume risk for its operation. The dependence on public dollars could increase substantially as the current collaborative system is pushed to form a network of local partnerships. Thus, a self-sustaining system that provides revenue at least equal to, if not in excess of, expenditures is the first goal of reform.

Another goal of this proposal is to transform the system from what some might see as a safety-net program into a more appealing system by incorporating market processes into its operation, so that private resource providers, and other potential stakeholders, will find it useful for their purposes. To this end, state policy should be directed at eliminating barriers that currently deter entrepreneurs from investing in the growth of the system. State policy should also stimulate the interests of future partners and investors who will assume risk for the system's success. Continued state investments should be channeled in the following directions:

- ❑ An interactive web-based technology to harness the power of the Internet in order to provide a platform for a community-based information and referral system;
- ❑ Training and support to equip call center I&R specialists and local liaison (“webmasters”) to effectively use the new technology;

- ❑ State ownership of data in the I&R system (including conversion cost for data now kept in the existing Database);
- ❑ Implementation of a universally, recognizable 211 telephony system in a *centralized call center* to give all 6.8 million Virginian citizens access to the World Wide Web, and attract a substantial volume of citizens as users;
- ❑ Initial costs for I&R specialists at the call center who receive and respond to the citizen information and referral needs;
- ❑ Initial costs to develop local liaisons decentralized across the state to network and market the system to customers and investors/stakeholders; and
- ❑ E-government analysis to incorporate the I&R system into the Governor's e-government portal initiative.

The preliminary cost estimate for the first year would be about \$861,000 and would be funded from existing resources. It is difficult to project the net cost for the second year, since it is expected that revenue would be generated to offset expenditures. But the expectation is that expenditures would approximate \$961,000. The \$861,000 currently budgeted by the state for I&R and for child care resource and referral (CCRR) services would be redirected toward implementing the reforms listed above.

A third important goal of this proposal is improved service delivery. The plan transitions the I&R services from the current regional structure to a centralized call center to benefit from greater economies of scale afforded by the new technologies. It decentralizes the outreach and marketing to the local level. Local, in the context of this plan, means a county/city geographical level. JLARC identified local networking as a weakness in the current system. This proposal addresses the weakness by providing at least six trained "webmaster" who serve as local liaisons to (1) network with partners who knowing or unknowing provide I&R services (e.g. professional specialized I&R providers, neighborhood centers, human resource divisions of business, and communities of faith, etc.), and (2) market access to the commercially viable information contained in the system as well as the visibility it brings to provider services.

The new interactive Internet technology creates opportunities for webmasters to forge local partnerships to deliver I&R services within cities, and even neighborhoods, and draw investors as a new type of stakeholder. Potential investors can purchase access to the system and become a registered user to serve the human resource needs of their clientele for a subscription fee. Alternatively, the large volume of customers seeking services will provide incentive to investors to publicize their services through the user-friendly technology. A contractor for either the call center and/or field operations could be selected through competitive bidding.

A fourth goal is to make the data collection of resource providers and use of data more efficient. Cumbersome, manual processes to persuade providers to complete periodic surveys on their services are no longer necessary. Interactive web technology taps the power of the Internet to make *current* resource data *immediately* available to achieve business purposes. Specialized I&R providers (e.g. CCRR) would only need to become a registered users of the system to benefit from continually current information. Moreover, registered resource providers could publicly post service information at their own website. New technology embraced by the system gives them the power to manage the website directly and immediately to adapt their service information to meet changing community needs.

The vision described in this plan will need continued guidance. New leadership is necessary. Consequently, the human services I&R advisory council's statutory mission and duties will need to change. A recommendation for reconfiguring the present council, however, is premature at this time. A better understanding about the appropriate size, representation, and appointing authority would be achieved based on experience after implementation is underway. During the interim, a task force of appropriate stakeholders with technical, programmatic, and market-oriented perspectives will be created to guide the transition of this program.

Likewise, that statutory responsibilities for the Department of Social Services will need to change to reflect a stronger emphasis on contract compliance and performance monitoring. The plan proposes incentive contracting instead of the traditional fixed rate approach. It also obligates the Department to establish and implement an ongoing contract performance monitoring to achieve the outcome standards set forth in the plan. If after a period of two years, the I&R system has not made significant improvements in performance, then a reasonable course of action for the General Assembly would be to eliminate public funding for the I&R system.

A final note regarding links to other local state initiatives. It may be advantageous to reform the I&R system along with work force investment initiatives as a means of attracting investment from new stakeholders. In the course of gathering information for this plan, the Secretary of Health and Human Resources met with the Greater Richmond Chamber of Commerce to learn about Work Force One. The Greater Richmond Chamber explained that employers are increasingly interested in providing human services to their employees as a means of retaining trained employees. Work Force One is working with VisionLink Inc. to develop an integrated community operating system (COS) that meets the information needs of the business sector.

The Internet *based* software components of the COS link workforce development (Next Step) with youth career opportunities (Path Finder) with social services integration (Tapestry). (Tapestry can be toured at www.visionlink.org.) Tapestry is a sophisticated, interactive *web-based I&R component*. The three components are integrated much like the different components in Microsoft Office Professional 2000. If the human services I&R system were woven into this work force development movement, it could become part of an information product quite attractive to a number of stakeholder/investors. For this to happen, it would be important that the I&R technology be compatible with such information systems so that future integration is possible.

A Proposed Plan to Restructure I& R Services in Virginia

Proposal for the Service Delivery Structure That Should Be Used to Implement Information and Referral Services Statewide

Currently, the statewide information delivery system is divided into six regions (Appendix I). The regions partition off the Planning Districts. The structure was established nearly a quarter century ago. Today, the system is a public/private partnership. The centers share data through the Information and Referral Information System (IRis). The centers survey providers periodically within their respective regions in an effort to keep the database current. Citizens can access the information through mail, personal visits, “quick guides,” a 1-800 number and, and more recently, a website *displayed* on the Internet. (Unfortunately, while this plan is being developed it has been learned that the vendor for the IRis database and web display is experiencing fiscal challenges that raise serious questions about the future use of this technology.) Each region has at least one call center, and one region has as many as six call centers (one in each county of the region).

The recent JLARC study, however, said that the regional centers “are not effective in collecting and maintaining an accurate and complete inventory of human services in their regions and in linking citizens with those resources.” It further noted that the present statewide system “is not well-developed.” This assessment, however, needs to be understood in the light of national trends. In the 11 states interviewed for this proposal, I&R programs appeared to be in a similar situation. Only Connecticut had substantial state funding (about 80 percent). The AIRS officials, and some of its professional members, praised Virginia’s regional system because it was supported by a significant level of state funds.

Based on the findings of the JLARC report, and information gathered to construct this proposal, there would appear to be only three broad funding approaches for the General Assembly to consider:

- ❑ Stay the course of the current collaborative public/private partnership and infuse significantly more dollars into the program to cover staffing and operational costs for an expanded system;
- ❑ Discontinue funding, as suggested in the JLARC’s conclusion; or
- ❑ Pilot a course different from the past, one that incorporates market processes into the system.

This plan pursues the latter approach. The design criterion for a new delivery structure should be to penetrate localities throughout the Commonwealth. It proposes to shift outreach and marketing responsibilities to the local level. Six local liaisons would coordinate networking and marketing activity in the defined local areas. They would be knowledgeable of human services and trained “webmasters” of the new operating system. They would provide support, investors, and stakeholders, and train others how to use this human services technology. The I&R services would be centralized into a single call center to gain greater economies of scale. The state’s role would be to make the system more attractive to future competitors (whether

public, private, or nonprofit) by removing barriers to entry into the I&R service market. In addition, with the new interactive Internet technology, liaisons to more easily promote local partnerships to deliver I&R services within cities, and even neighborhoods, and draw investors as a new type of stakeholder.

Public and private organizations were informally canvassed for their opinions about entry barriers in the current system that discourage their organizations from assuming the risk for the I&R service delivery component. Participants acknowledged the following as barriers to arousing more competitive interest in providing I&R services:

- ❑ A perception of current system as a safety-net program;
- ❑ Limited citizen use of the I&R services;
- ❑ Development of I&R resource provider data;
- ❑ Lack of technological enhancements such as (1) a interactive *web-based* operating system to foster greater citizen access to the Internet and allow private provider greater control over their own website information, and (2) a telephonic system to give consumers access to the Internet-base information;
- ❑ Limited awareness in the public at large about the availability and uses of I&R services; and
- ❑ State ownership of the provider database eliminates start-up costs that discourages market entry among possible I&R contractors.

This plan proposes that the state make these investments to eliminate these barriers. The state would make a reasonable investment in initial staffing for the centralized call center and local liaisons. This commitment would be limited, however, to a two-year pilot period. This would allow time to transition the market-oriented system and allow time to generate revenue from marketing commercially-viable information. During the pilot period, the state would carefully monitor the performance of the system according to key outcome indicators. Revenue generated would allow the program to expand beyond the \$861,000. The responsibility of the contractor(s) would be to provide skilled I&R specialists who could receive and respond to customer's needs at the call center. The same contractor might also organize the local liaisons and market the system in communities.

A key assumption is that these investments will create an I&R system that could attract new organizations as stakeholders/investors. Hospital emergency rooms might see a user-friendly system as a way of referring patients to appropriate care settings. Similarly, physician's offices, business, and faith-groups might conclude that this information, which could be displayed in their offices, would help them better care for the needs of their patients, employees, or parishioners. The power of the Internet would make information services readily available at individual locations. It would also provide opportunities for businesses to advertise appropriate information about an organization's human services through personally designed websites. This produces a powerful synergy, resulting in a valuable, saleable product.

On this latter point, consider the following question: Is it plausible to believe that the I&R system can be self-sustaining through marketing a commercially-viable information product? If the state invests in an effective system, there is reason to believe that it can. If enough customers of all income levels are seeking human services through the system, it would

be more cost-effective for a business, or human resource provider, to advertise on the website than in a comparable advertisement in the Richmond Times Dispatch (RTD).

For instance, a full black and white page presenting service information in the RTD would cost \$7,500 per day during the week, and \$8,500 on Sunday. A quarter page advertisement in black and white runs \$2,100 per weekday, and \$2,400 on Sunday. Color adds to the cost. By contrast, a colorful website robust with information in the I&R system might only cost a business \$500 per year. A business, or human resource provider, would pay less in one year than it costs for a comparable one-day, advertisement in the RTD. Assume that 50,000 subscribing organizations pay on average \$500 per year to use the system. In one year, the system would generate \$25 million dollars. Ten thousand investors would generate \$5 million dollars in one year. Five thousand investors would generate \$2.5 million in a year, about three times higher than its current budget.

The entrepreneurial spirit would be similar to e-commerce initiatives. The proposal does not promise that profits will match, or even come close to matching, those set on Wall Street. This is a false comparison. It does, however, seek to generate revenue equal to, or in excess of, the expenditures necessary to keep the system operating. If a market-oriented approach is unsuccessful, the General Assembly can consider discontinuing funds for the system after two years. If, on the other hand, the General Assembly wishes to test a market-oriented approach, the Department of Social Services could be directed to develop detailed work plans to implement the provisions in this proposal.

Proposal for Implementing a 211 Non-Emergency Phone Number

In this proposal, implementation of 211 telephony serves several objectives. Access created to information and referral services brings the client closer to the human service provider. It breaks down the digital divide and gives everyone the opportunity for expanded resource information. Its simplicity and universal availability will make it readily recognizable to the general public. Finally, implementing 211 promises to increase the volume of contacts that will make this type of information commercially viable.

The current system relies on a toll free number (1-800-230-6977) to access the state system at an annual cost of approximately \$7,000. Originating calls enter the system and are transferred to the nearest I&R regional center. Callers are then given information or referred. A 211 number holds promise for substantially increasing the volume of callers. Increased expectations means that additional I&R specialists will be required to receive and respond to callers' information needs.

Cost-Estimates for Implementing a 211 Telephony

If the experience with implementing a 211 phone line in the other five regions of the country surveyed is an indication of what will occur in Virginia, this proposal promises to increase the number of customers using the system. The current system does not receive a large customer volume. In FY 2000, there were approximately 129,000 contacts, a slight increase (nine percent) over FY 1999 (approximately 121,000).

Based on a survey of five regions in four states where 211 has been implemented, there is reason to believe that once implemented and marketed, the Virginia I&R system can expect a 40 percent increase in call volume. This is significant for several reasons. It has the potential for increasing the attractiveness of the system by increasing ease of access for customers in all income ranges. The possibility of drawing more customers into the system also represents an untapped competitive market for private enterprise, and opportunities to offset the costs of the system over time.

The JLARC observed that the number 211 might improve the Virginia I&R system. They also identified a requirement for 24-hour coverage, and the associated costs to provide this coverage. A recent FCC ruling reserved the use of 211 number for human services I&R, but did not mandate its implementation. Implementation falls to each state's public utility or public service commissions. The 24 hour coverage "recommendation" is established by the AIRS. The recommendation can be interpreted as having answering machines and voice mail capability after normal working hours.

This proposal separates the costs for telephonic implementation of 211 from higher operating costs associated with increased salaries for staff. The program structure recommended for implementation of 211 is based upon a centralized call center for Virginia. Interviews with other states show concrete cost considerations cannot be directly applied to Virginia due to differences in program structure, infrastructure considerations, and telephone service provider charges.

Based on the experience of the United Way of Metropolitan Atlanta, the proposal assumes a 40 percent increase in calls after implementing a 211 number. The local calling charge structure for the cost estimates is based on a 311 operation (non-emergency police and fire information) in the Hampton Roads area. One-time set-up charges, and ongoing charges based on call volume, were obtained from Bell Atlantic (Verizon) in consultation with the Department of Information Technology (DIT). (It is advisable to seek competitive estimates from other companies operating in Virginia.) Verizon provides the 311 telephonic support to Hampton Roads. Long distance charge estimates were also developed in consultation with DIT and are based on the prevailing rate (\$.0438 per minute) now charged the state by MCI. Of the total call volume, it was estimated that approximately 80 percent would be long distance, using the FY2000 call volume from the United Way of Richmond as a baseline for the proportion of local calls.

Six minutes is used as the average call time. Average call time is the number of minutes that an I&R specialist spends identifying callers' problem(s) and providing referral information to resource providers. This figure is derived from the United Way of Metropolitan Atlanta. Staff in the Atlanta center compared their average call time with other Metropolitan non-revenue producing I&R services around the country. Staff found the average call time ranged between six to eight minutes. A private consulting firm reported that the business standard for commercial call centers averages five minutes per call. Many commercial call services have far lower average call times.

In addition, DIT indicated that there would be costs associated with establishing digital technology that would efficiently handle the volume of calls at one location. A call volume exceeding 35,000 minutes requires digital phones. When applying this standard to the current

call volume of 130,000 (assuming a centralized call center and an average of six minutes per call), factoring in costs for a digital system is justified. At this level the calls would represent 65,000 minutes per month. Start-up charges and telephone upgrade costs (\$2000 per employee) for a digital phone system with the capacity to receive 24 calls simultaneously is factored into the illustration below. There is also a \$250 per month usage fee assessed for a digital system. First year start up costs would equate to \$24,600, assuming upgrades for nine telephones. Second year costs would equate to \$11,000 to purchase four additional telephones and upgrades, assuming a 40 percent annual increase in callers.

211 Proposal

Call Volume Projections and Associated Annual Telephone Charges

(Estimates based on 60-Month Contract)

Year	Start -Up Costs	Call Volume @ 40% Increase Per Year	Annual Recurring Local Charges	Long Distance Charges	Total
1 st	\$24,600	182,000	\$12,520	\$38,264	\$7,384
2 nd	\$11,000	254,800	\$15,288	\$53,570	\$79,858

Verizon offers three contracts for 311, a month-to-month (most expensive per call), a 36-month contract and a 60-month contract (least expensive per call). For the purposes of this illustration, a 60-month contract was used. Generally, the longer the contract and the higher the call volume, the lower the charge per call. Charges used in this illustration were \$.06 per call in both years. The calculation for the first and second year costs would be the sum of the start-up costs (including telephone upgrades), annual recurring local charges, and long distance charges.

Cost-Considerations for Receiving and Responding to a Increased Call Volume

There are many unquantified and undocumented assumptions that make a cost-estimate imprecise. Some important considerations would be non-personnel expenditures including office space and proper equipment. Another consideration is the cost of management to ensure quality control and customer satisfaction. This proposal assumes that interested contractors will have an infrastructure in place that can absorb both of these considerations. Information and referral specialists, however, are the relevant cost to consider in this proposal. A simple methodology for illustrating the cost can be derived from multiplying the average call time by the expected volume of contacts and dividing by the number of work hours in a work year (2080 hours). Each work year represents one FTE (in practice, however, a mix of part time and full time workers allow management the flexibility to adjust to seasonal and daily business needs).

As noted above, cost considerations include an average call time of six minutes. It should be noted, however, that this measure is probably lower than the average call time practiced in the regional centers in Virginia. Based on information from I&R directors, the average call time for the aggregated regional operations in Virginia appears to be about nine-plus minutes. (This is not a scientific calculation, and average call time varies among the centers.) Salary (only) information reported by I&R directors ranged from about \$16,500 for starting pay to \$27,500 for an experienced worker. The following chart shows the staffing patterns and expenditures assuming an average call time of six minutes; a projected annual call volume

increase of 40 percent in each of the next two years; and a per capita annual total compensation (salary and benefits) of \$31,000:

***Illustrated Projection of Staffing Pattern with
Expenditures for Centralized Call Center***

Projected Year	Expected Call Volume	Estimated number of I& R Specialists	Estimated Costs
Current (FY 2000)	130,000	6.2 FTEs	\$192,200
1 st Year	182,000	8.7 FTEs	\$271,250
2 nd Year	254,800	12.25 FTEs	\$379,750

There are a couple of observations based on these illustrations. First, the public funds currently appropriated for the system would be sufficient to cover the costs of I&R specialists. Second, there appear to be some efficiency to gain from consolidating the I&R services into a single location. I&R directors reported that I&R specialists working in the Virginia centers currently number about 23 FTEs and eight part time. This exceeds the number of projected staff needed to receive and respond to the projected 254,800 calls reached toward the end of the second year.

Proposal for Developing and Implementing A State-Level Web-Based Site

The objective is to increase the number of contacts. Callers are just one way of achieving that goal. The World Wide Web is equally important. It also empowers individuals through providing them with information that helps them solve their own problems. This is not to suggest that technology will replace people who care. But an interactive Internet-based system creates the possibility of reaching into communities in ways that staffing could not cost-effectively do. The Virginia Information Providers Network (VIPNet) estimates that three quarters of the adult population in Virginia have access to the Internet. A state-of-the art, interactive and dynamic web-based technology makes information transactions between the customer and provider accurate and more timely. The business objective is to build a sophisticated network of users with multiple and simultaneous points of access to the human services information.

In the past year, the partnership has created a statewide website called IRis. The manager of the website was unable to provide data on the number of visits received to date. Apparently, it is quite low. The recently implemented I&R statewide website is helpful, but it falls short of state technology standards established by Executive Order 65. After considering its drawbacks, it is not surprising that its usefulness has not shown promise in the first year. It is limited by its static display. A static display is problematic for new and revised provider data. Unlike dynamic, interactive uses of the Internet, the provider cannot revise critical service information without shipping information to a regional center. The process is cumbersome. Historically, it has taken weeks, or even months, to complete. Combined with loss of time is accuracy of data. The current practice entails that the regional I&R center mail (or e-mail) surveys to the

providers, and request that the provider complete and return it to the regional center, whereupon it is recorded in the database. This process is too inefficient to keep pace with rapidly changing community needs. Moreover, the IRis technology is already at capacity. In a recent development, the continued use of this web-display is in serious doubt as a result of the vendor's financial troubles.

The type of web-based system needed to make the I&R system attractive should have several characteristics:

- ❑ Multiple points of access (from any agency, business, health care facility, neighborhood center, public library, work, or home);
- ❑ Customizable and flexible to adapt to community and market needs (so that the content, layout and structure of the website is at a touch of the users keyboard);
- ❑ Dynamic (so that revised information is instantaneously available to the public);
- ❑ Capacity for numerous and simultaneous visits per minute; and
- ❑ Capacity for commerce.

On the one hand, the state could seek a developer to create or procure an operating system. The uncertainty of the support for the current product, and the need for a field-tested product might be weighty considerations that count against this possibility. On the other hand, the state could procure an Internet-based system. There does not seem to be many Internet operating systems on the market. The Department of Social Services identified and compared the three known in the industry (Appendix IV). Only one product called Tapestry, created by VisionLink, Inc., met these above criteria. In interviews with the company, it was learned that the product was both field tested and immediately available. The company's initial offering to license unlimited users statewide is a one-time cost of \$250,000. This expenditure could be evenly distributed over two years. The sever services (i.e. hosting, storage, access, and maintenance) would cost an additional \$24,000 per year. Data storage is particularly advantageous to the state because it makes possible a wider range of competitors for the call center contract whose lack of computer capacity might preclude them bidding. An additional charge might be necessary to convert data from the IRis system into this new operating environment. In addition, this proposal envisions a specialized training package for the nine to 16 I&R specialists in the call center and six webmasters serving as liaisons to localities. The cost for the two specialized training packages are estimated at \$36,600 in the first year and falling about 40% to \$24,000 in the second year. The local webmasters training package would provide *virtually unlimited* phone support.

The new system, with its web-based technology strategy, could gain further market visibility through the Virginia Information Providers Network (VIPNet). This proposal is compatible with the Governor's vision for Virginia's role as a global information technology leader (Appendix V). The I&R system could provide a single, common gateway to government and private sector human service information that will improve access to free information, while at the same time, build value-added services for *commercially-viable* information that is of interest to the business community.

As Virginia moves forward with local initiatives involving the Internet, it is key to understand that integration and compatibilities among virtual systems is a pre-eminent virtue. Thus, General Assembly may wish to weigh the challenges of and opportunities for coordinating this I&R proposal with the Work Force Investment initiatives that are only now being launched.

Proposal for Reconfiguring the Human Services I&R Advisory Council

The size, duties, and appointing authority are critical issues for an advisory committee. Other issues related to its duties and scope of authority are equally important. The current membership for the advisory council would likely differ somewhat, depending on the success of the pilot. If the General Assembly wishes to test this proposal, it would be premature to address these issues until operational information was gathered from the pilot.

There are good reasons for delaying decisions about the advisory council. First, experience from the market-oriented proposal will shape representation and size of the council. For instance, if e-commerce becomes a central business objective for the new system, an advisory council with representatives possessing that knowledge and experience would be crucial. Likewise, an advisory council would need to have appropriate stakeholders/investors in leadership capacities, such as faith-based organizations, which are currently not listed in statute. It is possible to envision a grant-maker and resource development expert sitting on the council to provide guidance to local partners on fund raising to support their important I&R initiatives. If the interactive web-based information system becomes part of the Governor's e-government initiative, it is reasonable to think that a seat should be reserved for a representative from that sector of government.

Second, if the I&R were to be blended into the Work Force Investment Board initiatives across the Commonwealth, the mission and membership of the advisory council would need to accommodate those interests. Third, it seems reasonable that practical concerns of size, membership, and membering authority give way to the "higher priority" of shaping a council driven by mission. Finally, it might be challenging to find qualified individuals willing to serve while the pilot is proving its merits. For similar reasons, it is prudent to delay a decision on appointing authority. Although there has been criticism for giving the I&R system too low a priority, it is difficult to see how delegating appointing authority to the Commissioner of Social Services elevates its importance. Such a delegation would be particularly problematic because I&R human services spans three Secretariats.

Meanwhile, if the General Assembly concurs with this proposal, the Secretary of Health and Human Resources, would establish an interim task force with the appropriate membership to guide the transition to a new market-oriented, decentralized structure. In addition, a Health and Human Resource Interagency coordinating workgroup lead by the Department of Social Service would be convened to meet at least quarterly to provide technical assistance to the Task Force on agency programs providing I&R services.

Proposal for Evaluating Performance of Service Delivery Structure

The Appropriation Act invites the Secretary of Health and Human Resources to consider "other relevant issues as may seem appropriate" in proposing a plan. Outcome performance measures that reinforce the provisions of this proposal are crucial to the success of the new system, and as a means to eliminate funding for the program if significant progress is not demonstrated after a reasonable period of operation. If the General Assembly adopts this plan, the following seven outcome measures will become the framework for the evaluation based on

performance. The contract will compliment performance achievement and will build revenue-sharing with the contractor into the performance agreement clauses. As an incentive, the greater the success in achieving the goals, the larger the share of revenue from registered user fees will be awarded to the organization.

The seven outcome measures, and general framework for evaluation are:

Desired Outcome 1: The I&R database will contain accurate, up-to-date, legitimate and comprehensive human service information.

Indicator 1a: Information in the database will be accurate as measured by periodic reviews and contact with agencies (web based and telephonically) throughout the year. Annually, a random sample of agencies in the database will be screened and updated with a 10 percent error rate allowed.

Indicator 1b: Information in the database will be comprehensive as measured by a random sample throughout the year, matching responsiveness to callers with additions of providers.

Indicator 1c: Information in the database will contain only legitimate human service providers as measured by control mechanisms which ensure agencies are in good standing and ethical. Standards will be applied such as current licensure, reports of malpractice or complaints to ensure providers are to be examined and appropriate decisions made to eliminate resources from the database as necessary.

Desired Outcome 2: The customer call rate will increase commensurate with an expanding database of resource providers to meet the information needs of customers in all income levels. (Specific target levels will be established.)

Indicator 2a: Expanded consumer base as measured by periodic, unobtrusive surveys of callers to ascertain their demographic characteristics.

Indicator 2b: Expanded consumer base as measured by an increase in calls consistent with marketing and advertising efforts.

Indicator 2c: Expanded consumer base as measured by statistical analyses, at least quarterly, to demonstrate a percentage increase in calls over past periods.

Desired Outcome 3: The database will expand to include an increased number of private human service providers.

Indicator 3a: An increased number of private providers in the database as measured by an analysis, at least semi-annually, to demonstrate a percentage increase of providers commensurate with marketing and advertising efforts.

Indicator 3b: An increased number of private providers in the database as measured by an analysis, at least semi-annually, to demonstrate a percentage increase in private providers over past periods.

Desired Outcome 4: An incremental increase in fee revenue from registration with the I&R network will be realized to ensure progress is made toward program financial self-sufficiency.

Indicator 4: The addition of service providers will meet financial goals established to cover operating costs incrementally as measured by quarterly financial reviews to ensure new providers are being added to the system consistent with expenditures on marketing and advertising.

Desired Outcome 5: All stakeholders in the I&R system, clients, investors, and providers will be satisfied with the rewards of membership and/or quality of services received.

Indicator 5a: Customer service follow-up with a random sample of clients will demonstrate overall satisfaction with the service received as measured by responses to surveys conducted on an ongoing basis.

Indicator 5b: Investors in the system (to include human service providers) will demonstrate overall satisfaction with their membership as measured by input from monthly/bimonthly "board meetings" with I&R and key community/human resource representatives to address program effectiveness and new initiatives.

Desired Outcome 6: The I&R network, through outreach and community relations, expand their partnerships with resources not normally integrated into human service networks (e.g. church groups and faith-based organizations, corporations and small businesses, and other private groups).

Indicator 6: The semi-annual review of database resources will measure percentage increases in private groups, businesses, or agencies.

Desired Outcome 7: I&R program data will assist the planning efforts of the state and other public agencies by identifying unmet needs or trends which can be considered for inclusion in program planning and resource allocation.

Indicator 7: The I&R network will provide feedback important to community, county, and state planning for meeting the needs of the population as measured by needs assessments provided at least quarterly, or as needed, submitted to monitor local indicators and identify patterns throughout the Commonwealth.

The estimated costs for administering these performance measures assumes that DSS has a competent staff with experience in private sector business management, and a background in Internet and information technology. Evaluation will add to the management and success of the system. It is critical that the Department be prepared to monitor the implementation of the provision in this plan.

Summary of Total Plan Expenditures

The purpose for the state's investment is to promote market-processes. The system must demonstrate the real potential to become self-sustaining after the pilot period. Incentives will exist for contractors to perform efficiently and generate revenue. If the system has not made significant in meeting the performance measure, or does not show promise of self-sustainability after two years, the General Assembly can then eliminate public funding. If there is revenue generated, priorities will be set on how to profit-share. The state, too, may look to relax its fiscal commitments a result of revenue growth. Consideration might also be given to setting aside a percentage of the revenue to assist low-income families in securing services.

Summary Table of Plan Expenditures

Investment	1 st Year	2 nd Year	Total Expenditures for Pilot	Recurring
Web-based I&R Operating System	\$125,000	\$125,000		
Sever fee hosting, access, & maintenance	\$24,000	\$24,000		
Conversion of IRis Data	unknown	0		
Web Training & Support <i>Local. Liaisons</i> <i>Call Ctr. Staff</i>	\$36,600 \$31,600 \$5,000	\$22,000		
211 Telephony <i>start- up</i> <i>local call vol.</i> <i>pkg.</i> <i>long distance</i> <i>pkg.</i>	\$75,384 \$ 24,600 \$12,520 \$38,264	\$79,858 11,000 \$15,288 \$53,570		
Staffing for 211 Telephony	\$271,250	\$379,750		
Local Liaisons	\$330,000	\$330,000		
Subtotal (total public funds)	\$862,234	\$960,608		
Current Commitment	(\$861,000)	(\$861,000)		
Total (New Investment)	\$1,234	\$99,608		

APPENDICIES

**INSTRUCTIONS FOR COMPLETING
THE VDSS INVOICE MASTER EXCEL SPREADSHEETS
Due the 20th of the month following expenditures**

Background on the two VDSS Master Invoices

This document was created in Excel 97 and modified in Excel 2000 for use by the contractor and subcontractors of the Virginia Department of Social Services' Statewide Information and Referral System. Detailed costs from the OTHER section of the contract budget, should always be completed first. On the Invoice spreadsheets, each month's data appears in two side-by-side columns. The Year to Date Expenditures and Balance columns at the far right of the spreadsheet accumulate data automatically and columns add automatically. The header, footer, and hidden columns must be reset each month.

Customize the Masters for your Contract

1. Open the "I&R Invoice Master for Sole Source" spreadsheet in Excel.
2. Under View, click Header and Footer and select Custom Header, enter your Contractor Name and Contract Number in the left section, starting with your cursor after the colon. Enter the current calendar year and Contact person in the right section. Save.
3. In the body of the spreadsheet, enter your Federal Identification Number (FIN) in cell B1.
4. Enter your contact phone in cell AG1 at the far right of the spreadsheet, placing your cursor at the end of the text in the cell.
5. In cell B25, enter the name of your signatory starting after the colon. Enter the title of your signatory in cell AE24 starting after the colon.
6. Save this document as "SE Invoice Master for Sole Source", substituting a short acronym for your center for the SE. Save a backup copy in a separate location. These files will be your blank copies for future contract periods.
7. Open your "SE Invoice Master for Sole Source" file and save as "SE Invoice for Sole Source". This will be your invoice for the current contract period.
8. In columns B and C, enter the total budgeted amount for each line item named in column A this is to include items under "Other" category. For example, the amount listed for Salaries should equal the total of the amount you budgeted for salaries under the original Sole Source contract. These columns are set to add automatically. When finished, the TOTAL listed at the bottom of the column B should exactly equal the budgeted amount identified from the Council of Community Services/I&R.
9. The Balance figures in columns AF and AG at the far right of the spreadsheet should equal any funds remaining in the Balance column of that last invoice PLUS your new budget figures. If this invoice is for the first year of contract, leave columns D and E blank. Save.

Using the Invoice for your Contract

1. Select all columns between the two columns for the current month and the Year to Date Expenditure. Under Format, click Columns and select Hide to remove the empty columns from your view.
2. Enter the expenditures for the current month in the appropriate columns. The columns and rows add automatically. Save. Print.

After completing this invoice, please make a hard copy, get the appropriate signature, and mail to:

Virginia Department of Social Services
Statewide Information & Referral Program
Theater Row Building
730 East Broad Street, 9th Floor
Richmond, Virginia 23219-1849

SAMPLE INVOICE

Contractor: Any Contractor of America

Expenditure Month: July Year: 2002

Contract No: USA-11-011-11

Contact Person: Jane
Doe

FIN Number: 33-0777777

Telephone Num

	Contract Budget		July Expenditures		August Expenditures		Year to Date Expenditures		Balance	
	VDSS Award	Match	VDSS Award	Match	VDSS Award	Match	VDSS Award	Match	VDSS Award	Match
SALARIES	\$147,000.00	\$0.00	\$5,962.92	\$0.00	\$5,962.92	\$0.00	\$59,541.18	\$0.00	\$87,458.82	\$0.00
EMPLOYEE BENEFITS	\$30,900.00	\$0.00	\$1,258.00	\$0.00	\$1,258.00	\$0.00	\$12,568.00	\$0.00	\$18,332.00	\$0.00
POSTAGE	\$7,000.00	\$0.00	\$201.08	\$0.00	\$61.81	\$0.00	\$1,403.56	\$0.00	\$5,596.44	\$0.00
RENT & UTILITIES	\$19,400.00	\$0.00	\$976.94	\$0.00	\$779.54	\$0.00	\$7,400.00	\$0.00	\$12,000.00	\$0.00
EQUIPMENT	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PRINTING	\$9,000.00	\$0.00	\$1,042.99	\$0.00	\$375.25	\$0.00	\$2,500.00	\$0.00	\$6,500.00	\$0.00
CONSUMABLE SUPPLIES	\$9,000.00	\$0.00	\$335.06	\$0.00	\$410.15	\$0.00	\$2,422.59	\$0.00	\$6,577.41	\$0.00
TRAVEL	\$10,000.00	\$0.00	\$171.61	\$0.00	\$208.67	\$0.00	\$2,620.38	\$0.00	\$7,379.62	\$0.00
SOFTWARE	\$3,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,500.00	\$0.00
OTHER: Itemize										
Insurance	\$700	\$0	\$195.00	\$0.00	\$0.00	\$0.00	\$395.40	\$0.00	\$304.60	\$0.00
Professional Fees	\$2,500	\$0	\$791.98	\$0.00	\$161.31	\$0.00	\$1,580.40	\$0.00	\$919.60	\$0.00
Computer Data Processing	\$1,000	\$0	\$581.76	\$0.00	\$92.63	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Conferences & Meetings	\$500	\$0	\$40.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dues	\$100	\$0	\$0.00	\$0.00	\$15.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Web Site Fee	\$400	\$0	\$90.00	\$0.00	\$75.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
T O T A L	\$235,800.00	\$0.00	\$11,647.34	\$0.00	\$9,400.28	\$0.00	\$90,431.51	\$0.00	\$148,568.49	\$0.00

I certify that the expenses and match are true and correct, are not allocated to any other program, and have been incurred in accordance with the contract between

this Contractor and the Virginia Department of Social Services.

Signature: _____

Title: Executive Director

Name of Signatory: __ Susan Duet

Date: August 28, 2002

**SAMPLE
I N V O I C E**

Contractor: Any Contractor of America

Expenditure Month: July Year: 2002

Contract No:USA-11-011-11

**Contact Person:Jane
Doe**

nber: (540) 985-0131

r

BUDGET - SUMMARY OF VDSS FUNDS AND MATCH FUNDS

Attachment B, p.1

FROM Enter Date TO Enter DateCONTRACTOR NAME Enter Name

BUDGET CATEGORY	I&R PROGRAM COMPONENT	TOTAL VDSS REQUEST	TOTAL MATCH AMOUNT
SALARIES			
EMP. BENEFITS			
POSTAGE			
RENT & UTILITIES			
EQUIPMENT			
PRINTING			
CONSUMABLE SUPPLIES			
TRAVEL			
SOFTWARE			
OTHER			
TOTAL REQUESTED FROM VDSS	\$0	\$0	\$0

	AMOUNT	PERCENT OF BUDGET
TOTAL REQUESTED FROM VDSS		
SUPPLIED FROM MATCH		
TOTAL PROJECT BUDGET		

REQUEST FOR PROPOSALS (RFP) APPLICATION FORM

RFP NUMBER: COM-00-011
ISSUE DATE: **August 9, 1999**
TITLE: Statewide Human Services Information and Referral System

LOCATION: Statewide
INITIAL CONTRACT PERIOD: October 1, 1999 through September 2000
PROPOSAL DUE DATE AND TIME: September 7, 1999 2:00 P.M.

ISSUING AGENCY: Commonwealth of Virginia
Department of Social Services
Division of Communications
730 East Broad Street, 8th Floor
Richmond, Virginia 23219

Sealed proposals for furnishing the services described herein will be received subject to the conditions cited herein until the proposal due date and time shown above. **PROPOSALS RECEIVED AFTER THAT TIME WILL BE RETURNED WITHOUT CONSIDERATION.** Send or hand deliver all proposals directly to the issuing agency shown above.

In compliance with this Request For Proposals, and to all the conditions imposed herein, the undersigned offers and agrees to furnish the services described in accordance with the attached signed proposal or as mutually agreed upon by subsequent negotiation.

(Name of Organization)

(Street Address)

(Street Address)

(City)

(State) (Zip Code)

Telephone: _____

FEI/FEN#: _____

Date: _____

By: _____
(Signature in ink)

Name: _____
(Printed or typed)

Title: _____

Facsimile #: _____

All requests for information should be directed to Kittie H. Winston, Program Manager, at the address above or by telephoning (804) 692-1859. **A mandatory pre-proposal conference will be held at 10:00 A.M. on Thursday August 19, 1999 at the Virginia Department of Social Services, 730 East Broad Street, Richmond, Virginia in Training Room 2 on the lower level of the building.**

STATEWIDE HUMAN SERVICES INFORMATION AND REFERRAL
SYSTEM
REQUEST FOR PROPOSALS
1999

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PROPOSAL APPLICATION FORM

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ATTACHMENTS

ATTACHMENT A - WORK PLAN
ATTACHMENT B - BUDGET
ATTACHMENT C - FISCAL STATEMENT
ATTACHMENT D - CODE OF VIRGINIA § 63.1-314.1- § 63.1-314.7
ATTACHMENT E - REGIONAL LISTING
ATTACHMENT F - MAP OF VIRGINIA

SECTION 1 - PURPOSE

- 1.1 The purpose of this Request for Proposals (RFP) is to solicit proposals from qualified sources to establish contracts for comprehensive and specialized information and referral services through competitive negotiation. Contracts established as a result of this competitive process will require the provision of comprehensive information and referral services including: data collection, maintenance and dissemination of information on all human service programs and resources to address human service needs in each locality of the Commonwealth. Specialized information and referral services to be procured through this RFP include data collection, and maintenance and dissemination of information on child care resource and referral.
- 1.2 This RFP requests proposals that will secure information and referral services based on a regional center-based network, the Statewide Human Services Information and Referral System, as presented in Chapter 17.1 sections 63.1-314.1 through 314.7 of the Code of Virginia (Attachment F).
- 1.3 The region and assigned localities are specified in Attachment D of this RFP.
- 1.4 This procurement will address both comprehensive human services information and referral and child care resource and referral. The funding available for the procurement of statewide human service information and referral services for the twelve-month period from **July 1, 1999 to June 30, 2000 is \$755,665.00. For the twelve month period beginning October 1, 1999 to September 30, 2000, there is a total of \$148,893.00 for child care resource and referral services to be administered through the Statewide Human Services Information and Referral System.**

SECTION 2 - BACKGROUND

- 2.1 The Statewide Human Services Information and Referral (I&R) Program is designed to collect and maintain accurate and complete resource data on a statewide basis and link citizens needing human services with appropriate community resources. Data that is collected by the regional information and referral centers, partner agencies and satellites is also used to assist in planning for human service delivery at the local, regional and state levels.
- 2.2 Virginia's Statewide Human Services Information and Referral Program has a history of more than twenty-five years of service to the citizens of Virginia and has experienced significant development and expansion. In 1998, six regional centers and their partner agencies provided free, confidential information on human services to over 140,403 callers and maintained resource files on over 16,000 agencies, programs and services available to meet human service needs. Coverage for each locality in the Commonwealth is paramount for the statewide I&R system, and the regional centers serve as vital hubs, linking people with the service they need. Regional centers, and local satellite partners that are near the people and providers of needed services, are more effective in rendering comprehensive and appropriate information and referral.
- 2.3 In efforts to improve the quality of service delivery and increase the capacity of the system, the Virginia Department of Social Services (the Purchasing Agency) will provide an Internet-based telecommunications network and has identified specialized software at all regional sites. Also, a centralized toll-free telephone number for the Statewide Human Services Information and Referral System will automatically link callers from any locality in the state to the closest regional I&R center.

SECTION 3 - STATEMENT OF NEEDS/SCOPE OF SERVICES

3.1 Comprehensive Human Services Information and Referral Services

- 3.1.1 The Contractor shall provide comprehensive information and referral services on behalf of the Virginia Department of Social Services. Comprehensive information and referral activities include the collection and maintenance of data about all private, not-for-profit, and public human service agencies, programs and services in a community.

3.2 Child Care Resource and Referral

- 3.2.1 The Contractor shall provide specialized child care information and referral (child care resource and referral) for the citizens of Virginia. The contractor will collect, maintain and disseminate information about child care services in the contractor's region.
 - 3.2.1.1 Information about child care facilities and home-based providers should include the address, hours of operation, cost, ages of children served, and any other available data.
 - 3.2.1.2 The contractor will obtain the consent of each child care service provider included in the resource database.
 - 3.2.1.3 Information regarding training opportunities, resources, and governmental programs such as the Child and Adult Food Program shall be collected and distributed to parents, child care providers and the general public.

3.3 Data Collection and Maintenance

- 3.3.1 The contractor shall collect essential information on all existing human service programs and services within the assigned coverage area. The information shall include, but not be limited to: name, address, telephone and fax numbers, hours of operation, a description of services provided, eligibility criteria, contact persons and any additional information the inquirer may need to contact and access the service or program.
- 3.3.2 All resource information (Information and Referral and Resource and Referral) must be entered and maintained in an automated system, using the Information and Referral Information System (IRIS) software, designated by the Virginia Department of Social Services. The Contractor shall supply the desktop and/or server equipment required to maintain the required automated system. Any equipment purchased by the Virginia Department of Social Services will remain the property of the Commonwealth of Virginia Department of Social Services.

- 3.3.3 The contractor shall update each community resource in its database as new information is available. The contractor will survey each service provider within the assigned region on a yearly basis.
 - 3.3.3.1 The contractor will obtain the consent of each service provider identified for inclusion in the resource database.
 - 3.3.3.2 Procedures must be implemented for verifying agency data to assure that the most accurate and complete information is maintained.
- 3.3.4 The contractor shall use the Taxonomy of Humans Services as the classification system for indexing the services maintained as a part of the human service information and referral database.
- 3.4 Assessment and Data Dissemination
 - 3.4.1 The contractor shall provide basic information and referral at no charge to members of the general public who make telephone, written or walk-in inquiries.
 - 3.4.2 Child care resource and referral provided under the requirements of this scope of services should include basic information needed to locate and contact child care facilities and providers by parents seeking to make child care arrangements for their children.
 - 3.4.3 The contractor will provide at least five (5) copies of directories, quick guides or other written products to the Virginia Department of Social Services and each local department of social services.
 - 3.4.4 Within six months of the contract award, the contractor will establish and maintain an I&R Regional homepage on the World Wide Web. The homepage will include a database that will allow individuals to search for I&R services.
 - 3.4.5 The contractor will provide adequate staffing to make information available to citizens, professionals and Virginia Department of Social Services staff via the system's statewide toll-free telephone number on weekdays during the hours of 8:30 A.M. to 7:00 P.M. These hours should address both programs: Information and Referral and Resource and Referral.
 - 3.4.6 The contractor may provide directly or establish formal agreements with partner agencies or satellites to provide access to information between the hours of 7:00 P.M. and 8:30 A.M.

- 3.4.7 The contractor shall provide professional assessment of caller's needs for human service resource information and make appropriate referrals.
- 3.4.8 The contractor shall supply to inquirers detailed information on community resources and any requirements for screening, application or eligibility.
- 3.4.9 Assessment and information dissemination may be conducted at sites other than the regional center, including satellite sites or offices.
- 3.4.10 The contractor will contact a minimum of 10% of referral cases to determine the outcome of the referral(s) or provide additional services.
- 3.4.11 The contractor will advocate on behalf of citizens at their request when required services are not available or are not being adequately provided by the community's service delivery system.
- 3.5 Regional Activities, Collaboration and Establishment of Partnerships
 - 3.5.1 The contractor shall provide I&R services within localities/regions as identified in Attachment E of this RFP.
 - 3.5.2 To maximize the effectiveness of a regional system of I&R, the contractor will specify linkages of specified partnership or affiliation with local information and referral entities of appropriate community partners for every county/city in the Commonwealth. The contractor will establish formal agreements/contracts with viable and appropriate local information and referral entities or community partners in each county and city within the contractor's specified region.
 - 3.5.3 Any formal agreement established with a satellite or partner agency to meet the requirements of this RFP shall identify scope of shared activities and allocation of funding. A copy of the formal agreement **must** be included in the final proposal submission.
 - 3.5.4 The contractor, and any satellites and formal partners must utilize the state approved Information and Referral software IRis. The formal agreement between the contractor and any partner will specify how the cost of the software is to be incorporated and shared.
 - 3.5.5 The contractor, its satellites and community partners will provide at no cost to the Department and other state-level contractors, copies of their regional databases. The databases will not be used in any manner, shared or sold by the Department or any other party, without explicit permission and prior knowledge of the contractor or subcontractor supplying the information.

- 3.5.6 The contractor, its satellites and community shall provide at no cost to the Department and other state-level contractors, electronic copies of their database, using the DSS provided telecommunications network, according to a schedule to be developed by the DSS Program Manager but no less than monthly.
 - 3.5.7 The Virginia Department of Social Services reserves the right to modify the regional structure in order to improve service delivery.
 - 3.5.8 The contractors shall develop and implement regional activities with other agencies, community organizations, private citizens and businesses to promote awareness of the Statewide Human Services Information and Referral System.
 - 3.5.9 The contractor shall participate in the Virginia Department of Social Services annual evaluation of the services provided by the Statewide Human Services Information and Referral System.
 - 3.5.10 Regional center management staff (or a representative) shall attend monthly meetings with, and shall work with, Virginia Department of Social Service staff and other regional center staff to plan and implement system goals and accomplishments.
 - 3.5.11 Regional center management staff (or a representative) shall attend meetings of the Statewide Human Services Information and Referral Contractors and the Statewide Human Services Information and Referral System Advisory Council.
 - 3.5.12 The contractors will participate in VDSS sponsored training opportunities, special initiatives, studies and surveys.
- 3.6 Automated Technology
- 3.6.1 The Virginia Department of Social Services shall provide a Frame Relay TCP/TI telecommunications network at each contractor site. The contractor shall connect desktops and/or servers to the provided telecommunications hubs and routers. The contractor shall identify the number of devices to be attached to the network. The Department of Social Services shall provide the contractor with the required number of TCP/TI addresses. The Department of Social Services, in cooperation with the Department of Information Technology, shall provide network management and support services for the wide-area network. The contractor shall provide network management and support services for the network in each I&R site.

- 3.6.2 The contractor shall provide the desktop computers, file servers, and peripheral equipment (including printers) necessary to support the requirements listed in this Request for Proposal. Specific details shall be included in the budget, Attachment B. The contractor shall be responsible for the maintenance service, repairs, and supplies for all such equipment.
- 3.6.3 The contractor shall be responsible for obtaining the appropriate licenses for the IRis software from benchmark. The current version is 2.0. The contractor shall be responsible for acquiring the necessary software maintenance support. The contractor shall be responsible for obtaining, testing and applying all software patches and releases supplied by the IRis software vendor.
- 3.6.4 The Department of Social Services shall provide a secure Internet-based telecommunications network. Through this network, the contractor will have access to the Department's ISP services including Internet access and e-mail. Each person assigned to work with the statewide human resource and referral system must sign the Department of Social Services security form prior to network access being provided and must read and comply with the Department of Social Services security policies and procedures and Internet Guidelines.
- 3.6.5 If the contractor elects to connect any of the I&R contracted equipment to an additional network separate from the Department of Social Services network, the contractor shall install the necessary firewalls and security software to protect the I&R network. Documentation as to the firewall and security measures shall be submitted by the contractor to the Department of Social Services Security Manager and are subject to review and approval.
- 3.6.6 The contractor shall purchase licenses for and install the current version of Norton Anti-Virus, Symantec Corporation on each desktop. The Department of Social Services Security Office will provide the mandatory configuration settings upon each contract award. The contractor shall purchase annual maintenance in order that the virus definition files can be continually updated and new software releases can be obtained. The contractor shall apply new software for Norton Anti-virus as supplied by Symantec Corporation.

SECTION 4 - PROPOSAL PREPARATION AND SUBMISSION REQUIREMENTS

4.1 General Requirements

4.1.1 RFP Response: Public and private, incorporated agencies or organizations located in Virginia are eligible to apply for these funds. IN ORDER TO BE CONSIDERED FOR SELECTION, APPLICANTS MUST SUBMIT THEIR PROPOSAL AND THE COMPLETE REQUEST FOR PROPOSAL. Three (3) originals (marked "Originals") including copies of the RFP, and five (5) copies of each complete response must be submitted to the Virginia Department of Social Services. No other distribution of the response shall be made by the applicant.

4.1.2 Completeness: All information requested must be submitted. Failure to submit all information requested may result in the proposal being considered non-responsive and, therefore, rejected.

4.1.3 Preparation: Proposals should be prepared simply and economically, providing a straightforward, concise description of capabilities to satisfy the requirements of the RFP. Emphasis should be on completeness and clarity of content.

4.1.4 Style: Proposals must be typewritten and single-spaced. Each copy of the proposal should be firmly bound in a single volume. All documentation submitted with the proposal should be in that single volume. Every page in the proposal shall be numbered in consecutive order.

4.1.5 Oral Presentation: Offerors who submit a proposal in response to this RFP may be required to give an oral presentation of their proposal to the Purchasing Agency. This provides an opportunity for the Offeror to clarify or elaborate on the proposal. This is a fact-finding and explanation session only and does not include negotiation. The issuing state agency will schedule the time and location of these preparations. Oral presentations are an option of the Purchasing Agency and may or may not be conducted.

4.2 Specific Requirements: Proposals should be as thorough and detailed as possible so that the Virginia Department of Social Service may properly evaluate the capabilities of the proposing entity to provide the required services. Responses must demonstrate the offeror's capabilities to serve specific geographic regions as listed in Attachment E. Offerors are required to submit the following items in the order presented below as a complete proposal.

- 4.2.1 Proposal Application Form: Complete and return the cover sheet for this RFP with required signatures and requested information. Three (3) cover sheets with original signatures must be submitted.
- 4.2.2 Description of the Agency (no more than two pages): Submit a brief summary of and an organizational chart depicting the applicant agency. Include a brief narrative that clearly describes the purpose and goals of agency/organization. Also include information regarding whom the agency serves, the agency's previous programmatic accomplishments in the area of information and referral services, child care resource and referral, and experience with using automated resource file and information databases.
- 4.2.3 Project Narrative: A detailed narrative of the proposed activities including:
- 4.2.3.1 Methods for Data Collection and Maintenance:
Describe the methods to be utilized in the collection and maintenance of resource information in the selected region. Describe relevant experience in the automated collection of resource data files, including the specific methods used and procedures for updating and maintaining collected information.
- 4.2.3.2 Methods for Assessment and Data Dissemination:
Explain the methods to be used in the assessment of caller needs and provision of information and referral services.
- 4.2.3.3 Regional Collaboration:
Specify activities, partnerships and plans for establishing and maintaining cooperation and collaboration with service providers and human service agencies.
- 4.2.3.4 Evaluation Plan and Methodology to Assess Success:
Discuss evaluation methodology that utilizes a process for ongoing review and follow-up. Describe mechanisms or systems to obtain data. Specify the percentage of calls to be included in the center's representative sample of referral cases to determine the outcome or provide additional services. Provide for analysis of results and customer feedback.
- 4.3 Required Attachments
- 4.3.1 Work Plan: Use Work Plan, **ATTACHMENT A**, to record the proposal's goal, objectives and strategies. Detail the necessary activities to achieve the objectives and explain the procedures that will be used to deliver the services. List any resources that will be needed to provide the services. Identify the staff responsible for service provision. Specify any plans for subcontracting. Indicate when the services/activities will be

implemented and the desired results. Include specific dates and time frames for all proposed activities. Use as many copies of this form as needed, and number each page consecutively starting with page number one (1). Provide two separate work plans, Work Plan I -Information and Referral; Work Plan II- Resource and Referral.

- 4.3.2 Budget: Complete Budget, Attachment B, pages 1-4, and attach it to your proposal. Look closely at your project's goals, objectives, and activities to estimate costs. Budgeted amounts should be necessary and reasonable for carrying out the proposed work plan. The budget should contain no unexplained costs. The explanation that an amount is what has been "historically" spent on that item is **NOT** acceptable. If funds are being requested for personnel salaries, specify the positions, pay rates and employee benefits. Show clearly how requested funds will fit into the full program budget. The amount and purpose of indirect costs must be fully explained. Funds for hardware, software, and maintenance support must be included in the budget along with an explanation as to how the amounts were derived. Provide two separate budgets: Budget I- Information and Referral; Budget II- Resource and Referral.
- 4.3.3 Fiscal Statement: Fiscal Statement, Attachment C, must be signed to certify that the agency has sufficient funds to cover project expenses for two months, since contract funds will reimburse incurred costs following the submission of appropriate invoices
- 4.3.4 Staff Job Descriptions: Complete job descriptions for all staff responsible for implementing the offeror's proposal must be attached. Knowledge, training and experience related to human services information and referral must be identified. Experience in planning, consultation and technical assistance should also be included.
- 4.3.5 Letters of Support: Letters must be attached to the RFP demonstrating that the proposal will have the support and cooperation of other agencies and organizations in the region that the contractor proposes to serve. Letters of support must cite specific knowledge and understanding of the activities of the responding agency in relation to the provision of human services information and referral and child care resource and referral services. Letters should not be mailed separately to the Department of Social Services. If letters are mailed to the Department, they will not be considered as part of the RFP. They will be destroyed.
- 4.3.6 Non-Discrimination in Employment Policy: A copy of the offeror's Non-Discrimination in Employment Policy must be submitted by all applicants.
- 4.3.7 Confidentiality Policy: A copy of the offeror's confidentiality policy must be submitted by each applicant agency providing direct services.

- 4.3.8 Operating Budget: The offeror's/partner's fiscal year ending **1998 (July 1997-June 1998) operating budget and a statement of actual costs for the previous year (July 1996- June 1997)**. If the Information and Referral Program is part of an umbrella organization, the allocation of shared administrative expenditures should be clearly shown.
- 4.3.9 Financial Statements: Financial Statements for the period of **July 1998 through January 1999, and fiscal year ending 1998 (July 1997-June 1998)**.
- 4.3.10 IRS Form: If the offeror agency is a private, not-for-profit corporation, a copy of the IRS form(s) certifying that the offeror is exempted from federal income tax under section 501(c)(3) of the IRS code.
- 4.3.11 Certificate of Incorporation/Authority: If the offeror is or will be a corporation, a copy of the applicant's Certificate of Incorporation or Certificate of Authority, or a copy of the application therefore, that has been submitted to the State Corporation Commission.

SECTION 5 - EVALUATION AND AWARD CRITERIA

A review committee shall review proposals. The review committee will reach group consensus and submit recommendations for award of contracts to the Commissioner of the Department of Social Services. The order in which the criteria are stated is not necessarily the order of their importance. Each proposal meeting the specified guidelines will receive full consideration. Each offeror will be notified in writing of the final decision.

- 5.1 Evaluation Criteria: To be considered for funding, proposals, must first meet the stated objectives of the RFP as described in the Statement of Needs/Scope of Services, section 3. In addition, proposals must meet general and specific requirements outlined in section 4, Proposal Preparations and Submission Requirements. Proposals shall be evaluated by the Purchasing Agency using the following criteria:

A. EVALUATION CRITERIA:

1. **Description of Applicant Agency/Demonstrates Capability to Carry Out Project (10 points)**
 - a. Describes purpose and goals of agency/organization
 - b. Specifies the population served by the agency
 - c. Describes agency's previous programmatic accomplishments in the area of information and referral services
 - d. Describes agency's previous programmatic accomplishments in the area of child care resource and referral
 - e. Demonstrates agency's previous experience with using automated human services information databases
2. **Narrative Clearly Defines the Project (40 points)**
 - a. Specifies geographic service area and clearly identifies the population to be served
 - b. Provides detailed work plan for the provision of comprehensive human services information and referral services
 - c. Provides detailed work plan for the provision of child care resource and referral services
 - d. Provides detailed work plan for data collection and maintenance
 - e. Provides detailed work plan for assessment and data dissemination
 - f. Uses measurable objectives
 - g. Provides days and hours of operation
 - h. Identifies qualified and experienced staff (paid or volunteers) to provide services
 - i. Identifies sufficient staff resources to plan and implement project

- j. Specifies satellites and community partnerships to be used to ensure coverage and effective service delivery for **all** localities in the specified region
3. **Narrative Clearly Demonstrates Regional Collaboration and Community Support (30 points)**
- a. Specifies plans and activities establishing community/regional level partnerships
 - b. Demonstrates support for the project and the agency in the region/community via letters of support
 - c. Includes signed agreement with any existing or proposed satellites or partners
1. **Provides Plan and Methodology to Assess Success (5 points)**
- a. Discuss evaluation methodology
 - b. Utilizes ongoing review
 - c. Has mechanisms/systems to obtain data
 - d. Provides analysis of results
 - e. Provides for customer feedback
2. **Budget (15 points)**
- a. Reasonableness of costs
 - b. Document sources of cash and in-kind match
 - c. Explain all costs
 - d. Costs consistent with proposed activities

B. AWARD OF CONTRACT

Selection shall be made of applications deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included in the Request for Proposal, including price. Negotiations may be conducted with the applicants so selected. Price shall be considered, but need not be the sole determining factor. After negotiations have been conducted with the applicants so selected, the agency shall select the applicants which, in its opinion, have made the best proposals, and shall award the contracts to those applicants. The agency may cancel this Request for Proposal or reject proposals at any time prior to an award and is not required to furnish a statement of the reason why a particular proposal was not deemed to be the most advantageous (section 11-65D, Code of Virginia). Should the purchasing agency determine in writing and in its sole discretion that only one applicant is fully qualified, or that one applicant is clearly more highly qualified than others under consideration, a contract document will incorporate the RFP, the contractor's proposal, the award letter and by reference all other requirements, terms and conditions as negotiated.

SECTION 6 - REPORTING AND DELIVERY REQUIREMENTS

The contractor shall produce the following reports of program activities.

- 6.1 The contractor shall submit quarterly reports of regional statistics and activities to the Virginia Department of Social Services. Specifically:
 - 6.1.1 Quarterly reports will be submitted no later than 30 days following the end of the last month in each quarter.
 - 6.1.2 Quarterly reports will be completed in the approved written or automated format.
 - 6.1.3 The contractor shall provide narrative summaries (anecdotal stories) of at least three (3) cases in which citizens have been assisted by the regional center. Identifying information such as names, addresses or other caller specific information is not to be included. The narrative summaries shall be submitted with the quarterly report.
 - 6.1.4 The contractor shall provide electronic copies of the databases according to the schedule to be established by the DSS Program Manager but on no less than a monthly basis.
- 6.2 The contractor will provide to the Department copies of any materials or products that have been developed under the auspices of this contract.
- 6.3 The contractor shall collect and provide to the Purchasing Agency upon written request information on service gaps, unavailable services and unmet community needs.
- 6.4 The contractor agrees to provide listings of and information about requests made by agencies, organizations or other entities for general or specialized directories, or copies of the resource database. This section requires that the contractor provide general information about both programs - Information and Referral and Resource and Referral. It is requested that reports be completed on an "as needed" basis.
- 6.5 The contractor agrees to provide any additional reports that the Purchasing Agency may request by written notice to the contractor.

SECTION 7 - GENERAL TERMS AND CONDITIONS

- 7.1 **VENDOR'S MANUAL:** This solicitation is subject to the provisions of the Commonwealth of Virginia Vendor's Manual and any revisions thereto, which are hereby incorporated into this contract in their entirety. A copy of the manual is normally available for review at the purchasing office and in addition a copy can be obtained by calling the Division of Purchase and Supply - (804) 786-3842.
- 7.2 **APPLICABLE LAWS AND COURTS:** This solicitation and any resulting contract shall be governed in all respects by the laws of the Commonwealth of Virginia and any litigation with respect thereto shall be brought in the courts of the Commonwealth. The Contractor shall comply with applicable federal, state and local laws and regulations.
- 7.3 **ANTI-DISCRIMINATION:** By submitting their bids or proposals, Bidders or Offerors certify to the Commonwealth that they will conform to the provisions of the Federal Civil Rights Act of 1964, as amended, as well as the Virginia Fair Employment Contracting Act of 1975, as amended, where applicable, The Virginians With Disabilities Act, the Americans with Disabilities Act and section 11-51 of the Virginia Public Procurement Act which provides:

In every contract over \$10,000 the provisions in 7.3.1.1 and 7.3.1.2 below apply:

7.3.1 During the performance of this contract, the Contractor agrees as follows:

- 7.3.1.1 The Contractor will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, or disabilities, except where religion, sex, or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the Contractor. The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
- 7.3.1.2 The Contractor, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, will state that such Contractor is an equal opportunity employer.
- 7.3.1.3 Notices, advertisements and solicitations placed in accordance with federal law rule or regulation shall be deemed sufficient for the purpose of meeting requirements of this section.

- 7.1.3.4 The Contractor will include the provisions of 3.3.1 above in every subcontractor purchase order over \$10,000, so that the provisions will be binding upon each subcontractor or vendor.
- 7.4 **ETHICS IN PUBLIC CONTRACTING:** By submitting their bids or proposals, Bidders or Offerors certify that their bids or proposals are made without collusion or fraud and that they have not offered or received any kickbacks or inducements from any other Bidder/Offeror, supplier, manufacturer or subcontractor in connection with their bid or proposal, and that they have not conferred on any public employee having official responsibility for this procurement transaction any payment, loan, subscription, advance, deposit of money, services or anything of more than nominal value, present or promised unless consideration of substantially equal or greater value was exchanged.
- 7.5 **IMMIGRATION REFORM AND CONTROL ACT OF 1986:** By submitting their bids or proposals, The Bidders or Offerors certify that they do not and will not during the performance of this contract employ illegal alien workers or otherwise violate the provisions of the federal Immigration Reform and Control Act of 1986.
- 7.6 **DEBARMENT STATUS:** By submitting their bids or proposals, Bidders or Offerors certify that they are not currently debarred by the Commonwealth of Virginia from submitting bids or proposals on contracts for the type of goods and/or services covered by this solicitation, nor are they an agent of any person or entity that is currently so barred.
- 7.7 **ANTITRUST:** By entering into a contract, the Contractor conveys, sells, assigns and transfers to the Commonwealth of Virginia all rights, title and interest in and to all causes of the action it may now have or hereafter acquire under the antitrust laws of the United States and the Commonwealth of Virginia, relating to the particular goods or services purchased by the Commonwealth of Virginia under said contract.
- 7.8 **MANDATORY USE OF STATE FORM AND TERMS AND CONDITIONS** Failure to submit a proposal on the official state form provided for that purpose may be a cause for rejection of the proposal. Modification of or additions to the General Terms and Conditions of the solicitation may cause for rejection of the proposal; however, the Commonwealth reserves the right to decide, on a case by case basis, in its sole discretion, whether to reject such a proposal.
- 7.9 **CLARIFICATION OF TERMS:** If any prospective Bidder or Offeror has any questions about the specifications or other solicitation documents, the prospective Bidder or Offeror should contact the buyer whose name appears on the face of the solicitation no later than five working days before the due date. Any revisions to the solicitation will be made only by addendum issued by the buyer.

7.10 PAYMENT:

7.10.1 To Prime Contractor:

- 7.10.1.1 Invoices for items ordered, delivered and accepted shall be submitted by the Contractor directly to the payment address shown on the purchase order/contract. All invoices shall show the state contract number and/or purchase order number; social security number (for individual contractors) or the federal employer identification number (for proprietorships, partnerships and corporations).
- 7.10.1.2 Any payment terms requiring payment in less than 30 days will be regarded as requiring payment 30 days after invoice or delivery, whichever occurs last. This should not affect offers of discounts for payment in less than 30 days, however.
- 7.10.1.3 All goods or services provided under this contract or purchase order, that are to be paid for with public funds, shall be billed by the Contractor at the contract price, regardless of which public agency is being billed.
- 7.10.1.4 The following shall be deemed to be the date of payment: the date of postmark in all cases where payment is made by mail, or the date of offset when offset proceedings have been instituted as authorized under the Virginia Debt Collection Act.

7.10.2 To Subcontractors:

- 7.10.2.1 A Contractor awarded a contract under this solicitation is hereby obligated:
 - 7.10.2.1.1 To pay the subcontractor(s) within seven (7) days of Contractor's receipt of payment from the Commonwealth for proportionate share of the payment received for work performed by the subcontractor(s) under the contract;
or
 - 7.10.2.1.2 To notify the agency and the subcontractor(s), in writing, of the Contractor's intention to withhold payment and the reason.

7.10.2.2 The Contractor is obligated to pay the subcontractor(s) interest at the rate of one (1) percent per month (unless otherwise provided under the terms of the contract) on all amounts owed by the Contractor that remain unpaid seven (7) days following receipt of payment from the Commonwealth, except for amounts withheld as stated in 7.10.2.1.2 above. The date of mailing of any payment by U. S. Mail deemed to be payment to the addressee. These provisions apply to each sub-tier Contractor performing under the primary contract. A contractor's obligation to pay an interest charge to a subcontractor may not be construed to be an obligation of the Commonwealth.

7.10 **PRECEDENCE OF TERMS:** Paragraphs 7.1-7.12 of these General Terms and Conditions shall apply in all Conditions shall apply in all instances. In the event there is conflict between any of the other General Terms and Conditions and any Special Terms and Conditions in this solicitation, the Special Terms and Conditions shall apply.

7.11 **QUALIFICATIONS OF BIDDERS OR OFFERORS:** The Commonwealth may make such reasonable investigations as deemed proper and necessary to determine the ability of the Bidder or Offeror to perform the work/furnish the item(s) and the Bidder or Offeror shall furnish to the Commonwealth all such information and data for this purpose as may be requested. The Commonwealth reserves the right to inspect Bidder's or Offeror's physical facilities prior to award to satisfy questions regarding the Bidder's or Offeror's capabilities. The Commonwealth further reserves the right to reject any bid or proposal if the evidence submitted by, or investigations of, such Bidder or Offeror fails to satisfy the Commonwealth that such Bidder or Offeror is properly qualified to carry out the obligations of the contract and to complete the work/furnish the item(s) contemplated therein.

7.12 **TESTING AND INSPECTION:** The Commonwealth reserves the right to conduct any test/inspection it may deem advisable to assure supplies and services conform to the specification.

7.13 **ASSIGNMENT OF CONTRACT:** A contract shall not be assignable by the Contractor in whole or in part without written consent of the Commonwealth.

7.14 **CHANGES TO THE CONTRACT:** Changes can be made to the contract in any one of the following ways:

7.15.1 The Commonwealth may order changes within the general scope of the contract at any time by written notice to the Contractor. Charges within the scope of the contract include, but are not limited to, things such as

services to be performed, the method of packing or shipment, and the place of delivery or installation. The Contractor shall comply with the notice upon receipt. The Contractor shall be compensated for any additional costs incurred as the result of such an order and shall give the Commonwealth a credit for any savings. Said compensation shall be determined by one of the following methods.

- 7.15.1.1 By mutual agreement between the parties in writing; or
- 7.15.1.2 By agreeing upon a unit price or using a unit price set forth in the contract, if the work to be done can be expressed in units, and the Contractor accounts for the number of units of work performed, subject to the Commonwealth's rights to audit the Contractor's records and/or to determine the correct number of units independently; or
- 7.15.1.3 By ordering the Contractor to proceed with the work and to keep a record of all costs incurred and savings realized. A markup for overhead and profit may be allowed if provided by the contract. The same markup shall be used determining a decrease in price as the result of savings realized. The Contractor shall present the Commonwealth with all vouchers and records of expenses incurred and savings realized. The Commonwealth shall have the right to audit the records of the Contractor as it deems necessary to determine cost or savings. Any claim for an adjustment in price under this provision under this provision must be asserted by written notice to the Commonwealth within thirty (30) days from the date of receipt of the written order from the Commonwealth. If the parties fail to agree on an amount of the adjustment, the question of an increase or decrease in the contract price or time for performance shall be resolved in accordance with the procedures for resolving disputes provided by the Disputes Clause of this contract or, if there is none, in accordance with the disputes provisions of the Commonwealth of Virginia's Vendor's Manual. Neither the existence of a claim or a dispute resolution process, litigation or any other provision of this contract shall excuse the Contractor from promptly complying with the changes ordered by the Commonwealth or with the performance of the contract generally.

- 7.15.2 The parties may agree in writing to modify the scope of the contract. An increase or decrease in the price of the contract resulting from such

modification shall be agreed to by the parties as a part of their written agreement to modify the scope of the contract.

- 7.15 **DEFAULT:** In cases of failure to deliver goods or services in accordance with the contract terms and conditions, the Commonwealth, after due oral or written notice, may procure them from other sources and hold the Contractor responsible for any resulting additional purchase and administrative costs. This remedy shall be in addition to any other remedies which the Commonwealth may have.
- 7.16 **TAXES:** Sales to the Commonwealth of Virginia are normally exempt from State sales tax. State sales and use tax certificates of exemption, Form ST-12, will be issued upon request. Deliveries against this contract shall be free of Federal excise and transportation taxes. The Commonwealth's excise tax exemption registration number is 54-73-0076K.

SECTION 8 - SPECIAL TERMS AND CONDITIONS

- 8.1 AUDIT:** The Contractor at its expense will have an independent contract audit performed annually in accordance with OMB Circular A-133, if an institution of higher learning or other non-profit institution, or OMB Circular A-128 if a state or local government agency. Three copies of the audit report will be sent to the Commonwealth within thirty days after receipt of the report by the institution or agency. The contractor hereby agrees to retain all books, records and other documents relative to this contract for five (5) years after final payment, or until audited by the Commonwealth of Virginia, whichever is sooner. The agency, its authorized agents, and/or State auditors shall have full access to and the right to examine any of said material during said period.
- 8.2 AVAILABILITY OF FUNDS:** It is understood and agreed between the parties herein that the agency shall be bound hereunder only to the extent of the funds available or which may hereafter become available for the purpose of this agreement.
- 8.3 CANCELLATION OF CONTRACT:** The Commonwealth reserves the right to cancel and terminate any resulting contract, in part or in whole, without penalty, upon sixty (60) days written notice to the Contractor. Any contract cancellation notice shall not relieve the Contractor of the obligation to deliver and/or perform on all outstanding orders issued prior to the effective date of cancellation.
- 8.4 DRUG FREE WORKPLACE:** The Contractor acknowledges and certifies that it understands the following acts by the Contractor, its employees, and /or agents performing services in state property are prohibited:
- 8.4.1 The unlawful manufacture, distribution, dispensing, possession or use of alcohol or other drugs; and
- 8.4.2 Any impairment or incapacitation from the use of alcohol or other drugs (except the use of drugs for legitimate medical purposes). The Contractor further acknowledges and certifies that it understands that a violation of these prohibitions constitutes a breach of contract and may result in default action being taken by the Commonwealth in addition to any criminal penalties that may result from such conduct.
- 8.5 SMOKE FREE ENVIRONMENT:** By signing this contract, the contractor certifies to the Commonwealth that they will comply with the requirements of Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), which requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provisions of health, day care, education, or library services to children under the ages of 18, if the services are funded by

Federal programs either directly or through State or local governments, by Federal grant, contract, loan , or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor agrees that it will require the language of this certification to be included in any subawards (subcontractors or purchase orders) which contain provisions for children's services so that the provisions will be binding upon each subcontractor or vendor.

- 8.6 INDEMNIFICATION:** Contractor agrees to indemnify, defend and hold harmless the Commonwealth of Virginia, its officers, agents, and employees from any claims, damages and actions of any kind or nature, whether at law or in equity, arising from or caused by the use of any materials, goods, or equipment of any kind or nature furnished by the Contractor/any services of any kind or nature furnished by the Contractor, provided that such liability is not attributable to the sole negligence of the using agency or to failure of the using agency to use the materials, goods, or equipment in the manner already and permanently described by the Contractor on the materials, goods, or equipment delivered.
- 8.7 MINORITY/WOMEN OWNED BUSINESSES SUBCONTRACTING AND REPORTING:** Where it is practicable for any portion of the awarded contract to be subcontracted to other suppliers, the Contractor is encouraged to offer such business to minority and/or women owned business. Names of firms may be available from the Commonwealth and/or from the Division of Purchases and Supply. When such business has been subcontracted to these firms and upon completion of the contract, the Contractor agrees to furnish the purchasing office the following information: name of firm, phone number, total dollar amount subcontracted, and type of product/service provided.
- 8.8 PRE-PROPOSAL CONFERENCE:** A mandatory pre-proposal conference will be held as indicated on the first page of the Request for Proposal Application Form. The purpose of such a conference would be to allow potential offerors an opportunity to present questions and obtain clarification about any part of this solicitation. Attendance at this conference is a prerequisite to submitting a proposal. Offerors who intend to submit a proposal are required to attend. Any changes resulting from such a conference would be issued in a written addendum to the solicitation.
- 8.9 PRIME CONTRACTOR RESPONSIBILITIES:** The Contractor shall be responsible for completely supervising and directing the work under this contract and all subcontractors that he/she may utilize, using his best skill and attention. Subcontractors who perform work under this contract shall be responsible to the

Prime Contractor. The Contractor agrees that he is as fully responsible for the acts and omissions of subcontractor and of persons employed by them as he is for the acts and omissions of his own employees.

- 8.10 SUBCONTRACTS:** No portion of the work shall be subcontracted without prior written consent of the Commonwealth. In the event that the Contractor desires to subcontract some part of the work specified herein, the Contractor shall furnish the Commonwealth the names, qualifications and experience of their proposed subcontractors. The Contractor shall, however, remain fully liable and responsible for the work to be done by its subcontractor(s) and shall assure compliance with all requirements for the contract.
- 8.11 CONTRACTOR AS INDEPENDENT CONTRACTOR:** During the performance of this contract, the Contractor shall be regarded as an independent contractor and not as an agent or employee of the Commonwealth of Virginia or the Commonwealth. The Contractor shall be responsible for all its own insurance and federal, state, local and social security taxes.
- 8.12 RENEWAL OF CONTRACT:** This contract may be renewed by the Commonwealth upon written agreement of both parties for two (2) successive one (1) year periods, under the terms of the current contract, and at a reasonable (approximately ninety (90) days) time prior to the expiration.
- 8.13 EQUIPMENT:** Equipment purchases under the terms of this contract shall be limited to the equipment indicated in the attached budget. Equipment purchased under this contract shall be retained by the Contractor during the period of performance of the contract. Ownership of equipment purchased under this contract shall revert to the Commonwealth at the end of the contract period unless ownership is transferred to the Contractor by the Commonwealth in writing. No depreciation or use charges on equipment purchased under this contract shall be claimed on this or any future contract with the Commonwealth of Virginia or any of its agents.
- 8.14 CONFIDENTIALITY:** Any information obtained by the Contractor concerning recipients of services under this agreement shall be treated as confidential in accordance with relevant provisions of State and Federal law.
- 8.15 CONTRACTOR PERFORMANCE:** The Commonwealth may monitor and evaluate the Contractor's performance under the contract through analysis or required reports, expenditure statements, site visits, interviews with or surveys of relevant agencies/organizations and individuals having knowledge of the Contractor's services or operations, audit reports, and other mechanisms deemed appropriate by the Commonwealth. Performance under this contract shall be a primary consideration for extension of this contract and may be a consideration in future contract awards and negotiations.

- 8.16 OBLIGATION OF OFFEROR:** By submitting a proposal, the applicant covenants and agrees that the applicant has satisfied itself, from its own investigation of the conditions to be met, that the applicant fully understands its obligation and that it will not make any claim for or have right to cancellation or relief from the contract because of any misunderstanding or lack of information.
- 8.17 OFFER BINDING FOR 120 DAYS:** This offer shall be binding upon the applicant for one hundred twenty (120) calendar days following the proposal opening date.
- 8.18 OWNERSHIP OF MATERIALS:** Ownership of all data, material, reports, studies, photographs, negatives, films, videos, or other documents prepared by the Contractor shall belong exclusively to the Commonwealth and be subject to public inspection in accordance with the Virginia Freedom of Information Act. Trade secrets or proprietary information submitted by an applicant shall not be subject to public disclosure under the Virginia Freedom of Information Act; however, the applicant must invoke the protection of this section prior to or upon submission of the data or other materials, and must identify the data or other materials to be protected and state the reasons why protection is necessary. The Contractor shall not use, willingly allow or cause to have used such materials for any purpose other than performance of the Contractor's obligation under this contract without the prior written consent of the Commonwealth. Any materials produced under this contract must bear the Title shown on page one of the Request for Application Form of this Request for Proposals.
- 8.19 COMPENSATION TO THE CONTRACTOR:** Compensation to the Contractor for delivered services shall be as follows:
- 8.19.1 Actual expenditures shall be invoiced pursuant to approved line-item budget categories in Attachment B. Deviations from approved line-item budget of more than \$100 in any line-item shall be submitted in writing immediately to the Commonwealth for the Commonwealth's prior approval at least thirty (30) calendar days prior to the intended effective date.
- 8.19.2 The invoice period shall be monthly. The Contractor shall invoice the Commonwealth each invoice period on forms supplied by the Commonwealth and shall submit an invoice showing no services delivered if that is the case in any invoice period. The Commonwealth shall not be obligated to pay for services when the Contractor fails to submit monthly invoices for such services within thirty (30) calendar days after the close of the invoice period in which services were delivered. Invoices which are correct and are received by the Commonwealth within ten (10) calendar days after the close of the invoice period shall be processed and paid no later than thirty (30) calendar days after the close of the invoice period. Those invoices received later shall be processed and paid with the next invoice. The June invoice must be estimated and submitted in advance. A letter from the Commonwealth will notify the Contractor of the

deadline for June invoice submission. All revenue from the sale of products derived through activities performed pursuant to this contract shall be reported to the Commonwealth and may be applied as an adjustment to defray costs for the Commonwealth.

- 8.19.3 If the Contractor fails to correctly provide any services and/or reports as specified in this contract, and in the time period specified herein, the Commonwealth may withhold payment of invoices until said services and/or reports are provided. All services provided by the Contractor pursuant to this contract shall be performed to the satisfaction of the Commonwealth, and in accord with applicable federal, State and local laws, ordinances, rules and regulations. The Contractor shall not receive payment for work found by the Commonwealth to be unsatisfactory, or performed in violation of federal, State or local laws, ordinances, rules or regulations.
- 8.19.4 The Contractor will be required to maintain accounting records to support all requests for reimbursement. These records shall be available for review by the State. Expenditures will be monitored by the Division of Communications.
- 8.19.5 Matching funds needed for the grant proposal shall not be used as match for any other funding source. The match must be directly related to supporting the activities necessary for project success. Federal funds may not be used as a match for other federal funds.
- 8.19.6 Salaries for existing county or city employees shall not be paid from funds expended under this contract
- 8.19.7 All invoices submitted by the Contractor must contain the contract number, the FIN number, and then be submitted to:

Virginia Department of Social Services
Office of Communications
730 E. Broad Street, 8th Floor
Richmond, VA 23219

- 8.20 EXCESSIVE DOWNTIME:** Equipment or software furnished under the contract shall be capable of continuous operation. Should the equipment or software become inoperable for a period of more than two (2) consecutive calendar days, the contractor shall promptly replace the equipment or software at no charge upon the request of the Purchasing Agency. Such replacement shall be with new, unused product(s) of comparable quality, and must be installed and operational within three (3) days following the request for replacement.
- 8.21 TITLE TO SOFTWARE:** By submitting a proposal, the offeror represents and warrants that it is the sole owner of the software or, if not the owner, that it has

received all legally required authorizations from the owner to license the software, has the full power to grant the rights required by this solicitation, and that neither the software nor its use in accordance with the contract will violate or infringe upon any patent, copyright, trade secret, or any other property rights of another person or organization.

- 8.22 YEAR 2000 COMPLIANT (AND ENABLEMENT) WARRANTY:** The contractor warrants that all software, firmware and hardware product(s) delivered to the Commonwealth of Virginia under any agreement, and which is used in accordance with the product documentation provided by the contractor, shall be 4-digit Year 2000 compliant (or approved enabled). All products shall accurately process all date-change data from start to finish, including, but not limited to, twentieth, twenty-first centuries and leap year calculations.

Training Assistance

IRis Software - Offered by SunCoast Custom Programming

1. Videos: SunCoast Custom Programming/IRis Software Products, the new owners of the IRis source code, provides each purchaser with 2 videos on Using IRis and 2 videos on Setting Up IRis. See Appendix for a brief outline of the topics on each video.
2. National and Regional Conferences Sponsored by AIRS (Alliance of Information and Referral Systems, the international professional organization for I&R) and its affiliates: SunCoast Custom Programming/IRis Software Products may offer training sessions at some of these conferences each year. See their web site (www.suncoastprograms.com) for details. Or see registration materials for particular conferences.
3. Center for Information and Crisis Services in Lantana, Florida, offers both on-site and at-your-location training under special arrangements with SunCoast Custom Programming/ IRis Software Products. This is one of the main development sites for IRis and the oldest installation. The center is completely computerized. It has over 80 volunteers who use IRis exclusively as well as 31 full time staff, who use IRis in various ways. i.e.: Crisis Line; Elder Helpline; Teen Hotline and more. All arrangements and payments for training are made directly with The Center for Information & Crisis Services. The phone number is (561) 533-1098 or (561) 533-1076.

The Center for Information and Crisis Services' on-site training is a personalized 2 day hands-on workshop. The IRis system administrators will take you through setting up, operating and customizing IRis for your agency. It includes expert advice on coping with special circumstances and may be extended.

IRis Software - Conducted by Others

1. After September 9, 2001 there will be additional IRis Trainers. They are experienced IRis Users who have received special training from SunCoast. Contact SunCoast IRis Technical Support at 800 335-8817 or 561 641-2897 for available trainers.
2. Each regional center in the Virginia Statewide I&R System is a resource for all the others.
3. National IRis Users Group: E-mail 2 national IRis list serves to access their knowledge of IRis in an effort to resolve problem. The addresses to join the two groups are:

<http://www.egroups.com/group/iris-users>

<http://lyris.unc.edu/cgi-bin/lyris.pl?enter=IRis>

Information & Referral Services

1. *ABCs of I&R* is published by AIRS. It is as a two-volume set of comprehensive training manuals that present the best practices in the field of I&R. Volume one includes individual study guides for each topic. Volume two includes complete instructions for trainers--templates for handouts and overheads are provided Modules in both volumes include: Basic I&R Competencies, Assisting Difficult People, Special Populations, Developing and Managing a Resource File, Managing an I&R Program, Professional Growth and Development, Staying Afloat--Ensuring Your I&R Program's Survival, and I&R in Times of Disaster. See the AIRS web site at <http://www.airs.org>.

Training Assistance

Page 2

2. The IR-Networker Listserv(e) e-mail service is a free forum for exchanging information open to all I&R staff. It is oriented toward management of I&R services and requests for assistance in locating services outside your local area.

There are two ways to join the AIRS Networker.

- The simplest is to use the web interface at <http://groups.yahoo.com/group/airsnetworker>
- There is a link called "Subscribe" located in the upper right hand corner. The subscription wizard will ask you a couple of questions about the options that are available to you.

Note: In order to use the web interface, you have to register with Yahoo for a free membership. It's not mandatory to join Yahoo Groups, just easier to use if you do. An alternate sign-up method is to send an email to airsnetworker-subscribe@yahoogroups.com from the email address that you'd like to use.

INFORMATION & REFERRAL MANUAL
Suggested Changes

1 – DIRECTORIES

2 – POLICIES

3 – MINUTES

4 – CORE LEVEL OF SERVICES

5 – DATABASE POLICIES

6 – INFORMATION & REFERRAL PRODUCTS

7 – CONTRACTOR REPORTING REQUIREMENTS

8 – MEMORANDA OF AGREEMENTS/PARTNERSHIPS

9 – STATEWIDE PUBLICITY CAMPAIGN

10 – MONITORING AND ASSESSMENT INSTRUMENTS

11 – STANDARDS FOR COMPUTERS/COMPUTER SOFTWARE

12 – STANDARD LETTERS/CONTRACTS

13 – REPORTS

14 – FINANCIAL DOCUMENTATION

15 – APPENDIX

**STATEWIDE INFORMATION & REFERRAL PROGRAM
ORDER FORM
PUBLICITY & OUTREACH MATERIALS**

Requested by: _____
Name & Address

Telephone Number

STATE NUMBER OF ITEMS NEEDED

- _____ **Bic Clic Ink Pens (Pink)**
- _____ **Brochures (colored)**
- _____ **Coin & Key Purses**
- _____ **Key Ring**
- _____ **Magni-Lens Magnifier**
- _____ **Note Pad**
- _____ **Pencils**
- _____ **Pens**
- _____ **Saddle Bag (black)**
- _____ **Screen Sweeps**
- _____ **Self-Adhesive Post-it Notes**
- _____ **Short Run Patch Handle Bags (plastic)**
- _____ **Tote Bags (red and black)**

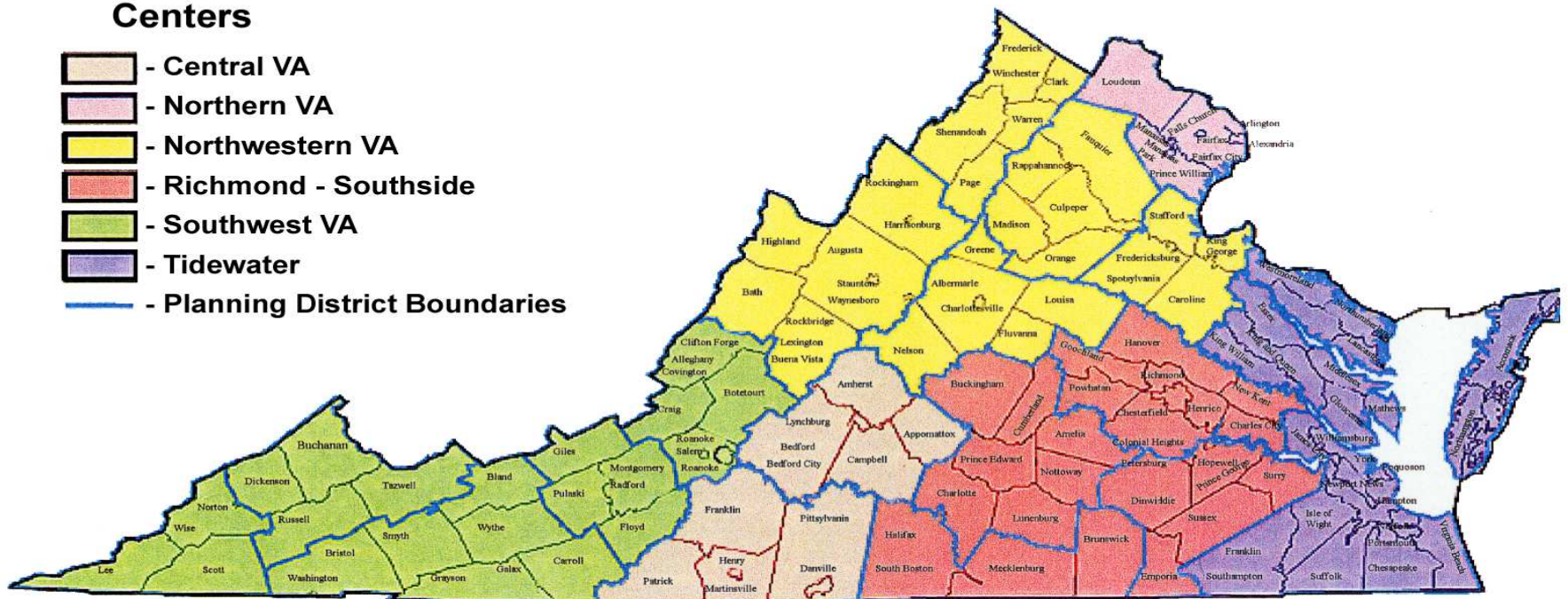
Statewide Information & Referral System

Regional Centers

Phone: 800-230-6977

Centers

-  - Central VA
-  - Northern VA
-  - Northwestern VA
-  - Richmond - Southside
-  - Southwest VA
-  - Tidewater
-  - Planning District Boundaries



Date	Time	Place	Chairman	PersonName	Minutes	PersonSeconded	MeetingDate	AdjournedTime
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Information and Referral Advisory Council Minutes

The Information & Referral Advisory Council met on «Date» at «Time» a.m./p.m. The meeting took place at «Place».

Present were: (those checked; those not checked were absent)

Guests (Please list all guests below)

Chairman: «Chairman»

(or in his/her absence, _____.)

Minutes: «PersonName» moved that the «Minutes» minutes be approved as written/corrected «PersonSeconded» seconded.

Items of Business:

To Do:

Next Meeting: «MeetingDate»

Adjourned (time): «AdjournedTime»

Date	InsertDate	Time	Designee	Month	DatePlaceand Time	AdjournedTime
------	------------	------	----------	-------	----------------------	---------------

<p style="text-align: center;">STATEWIDE INFORMATION AND REFERRAL CONTRACTOR'S MINUTES «Date»</p>
--

Present were: (Chairperson first the rest in alphabetical order)

George Harden - Chairperson	Norfolk
Beth Baber	Staunton
Patricia (Took) Couto	Richmond
Sandra King	Roanoke
Joan Phelps	Lynchburg
Tylee Smith	Northern Virginia
Kittie Winston	VDSS, Information & Referral Program
Valerie Whitfield	VDSS, Information & Referral Program

Other Attendees: (List Other Attendees in alphabetical order)

The Information & Referral Statewide Directors met on «InsertDate» at «Time».

ORDER OF BUSINESS:

- **VIRGINIA DEPARTMENT OF SOCIAL SERVICES REPORT**
- **OTHER ITEMS OF BUSINESS**

DESIGNEE FOR TAKING NEXT MONTH'S MINUTES

«Designee»

AGENDA ITEMS FOR «Month»

NEXT MEETING

«DatePlaceandTime»

ADJOURNED (TIME)

The meeting was adjourned at «AdjournedTime» p.m.

RESPONSIBILITY FOR FUTURE MINUTES

Date	Time	Place	Chairman Name	PersonNa me	Minutes	Seconded	NextMeeti ng	Adjourne dTime
------	------	-------	------------------	----------------	---------	----------	-----------------	-------------------

INFORMATION AND RERERRAL DATABASE USER'S GROUP MINUTES

The Information & Referral Database Users Group met on «Date» at «Time» a.m./p.m. The meeting took place at «Place». (or Conference Call)

Present were: (those checked; those not checked were absent)

Shelia Archer - Richmond
Beth Baber - Staunton
Cora Dickerson - Richmond
Mary Elliott - Charlottesville
George Harden - Tidewater
Sandra King, Chairperson - Roanoke
Pam McAdams - Roanoke
Joan Phelps - Central Virginia
Tylee Smith - Northern Virginia
Pat Stump - Lynchburg
Valerie Whitfield - VDSS

Guests (Please list all guests below)

Chairperson:

«ChairmanName»

(or in his/her absence, _____.)

Minutes: «PersonName» moved that the «Minutes» minutes be approved as written/corrected «Seconded» seconded.

Items of Business:

To Do:

Next Meeting: «NextMeeting»

Adjourned (time): «AdjournedTime»

Date	Time	Place	Chairman Name	PersonNa me	Minutes	PersonSec onded	MeetingD ate	Adjourne dTime
------	------	-------	------------------	----------------	---------	--------------------	-----------------	-------------------

INFORMATION AND REFERRAL TECHNICAL ASSISTANCE ADVISORY COUNCIL MINUTES

The Information & Referral Technical Assistance Advisory Council met on «Date» at «Time» a.m./p.m. The meeting took place at «Place».

Present were:

Guests (Please list all guests below)

Chairperson:

«ChairmanName» (or in his/her absence, _____.)

Minutes: «PersonName» moved that the «Minutes» minutes be approved as written/corrected «PersonSeconded» seconded.

Items of Business:

To Do:

Next Meeting: «MeetingDate»

Adjourned (time): «AdjournedTime»



RECEIVED

JUN 26 2002

VDSS OFFICE OF COMMUNICATIONS
AND PUBLIC RELATIONS

COMMONWEALTH of VIRGINIA

Department Of

Mental Health, Mental Retardation and Substance Abuse Services

Post Office Box 1797

Richmond, Virginia 23218-1797

RICHARD E. KELLOGG
COMMISSIONERTelephone (804) 786-3921
Voice/TDD (804) 371-8977
www.dmhmrzas.state.va.usCONTRACT MODIFICATION AGREEMENT

Date: September 21, 2001

Contract No.: 720C-00610-98D00

Modification: 003

Issued By: Commonwealth of Virginia,
Department of Mental Health, Mental Retardation and Substance Abuse
Services

Contractor: United Way Services - Richmond, Virginia

This Supplemental Agreement is entered into pursuant to the provision of the basic contract.

Description of Modification:

1.0 This modification represents the third renewal of the above referenced contract. This renewal period shall begin October 18th 2001 and end October 18, 2002. There are no remaining renewal periods.

2.0 The following is understood between the Contractor and the Contracting Agency:

2.1 Fees for services provided by the Contractor for this renewal period shall not exceed \$43,000.00.

2.2 The following services shall be provided during this renewal period:

Service	Description	Fee
I&R Staff Person	I & R staff will answer Information and Referral line during extended hours and/or research and maintain database of resources meeting the needs of infants/toddlers with disabilities. This person will also be responsible for the dissemination of new information to appropriate regional center regarding services available for infants and toddlers with disabilities. This person will also assist in staffing Advisory Board.	\$30,788
Regional Database	Regional center for quarterly data exports (a minimum of quarterly and a maximum of	\$3,000

Modification 003 to Contract 720C-00610-98D00
Dated: September 21, 2001

1

Contractor Initials: *AB*Date: *9/22/01*Contracting Agency Initials: *JK*Date: *10/3/01*

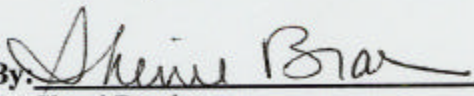
Service	Description	Fee
Usage	monthly data exports) and data maintenance. (Regional I&R centers receive funding from both private and public sources to operate their centers.) It is expected that data exports will be requested more frequently as statewide changes to data are implemented and requested by DMHMRSAS.	
Travel	Regional and local travel to train CPS centers utilizing directory on disk. Meet with regional I&R centers to coordinate and enhance statewide directory and online directory. Attend relevant meetings to include advisory board meetings.	\$1,500
Program Management	VP and Call Center Manager of Community Resources will provide oversight of contract to include I&R call center functions, database function, fiscal responsibility, coordination of regional center information, and Advisory Board. VP will coordinate the development and dissemination of the Statewide Quick Guide of Services for People with Disabilities. Provide all required quarterly and monthly reports.	\$2,500
Training	Meet with CPE staff to enhance their knowledge of available community human service resources and train staff on the availability of a direct service link to I&R staff and resource data via the telephone and web. Train CPE staff on availability of special reports, and services available from I&R Center. Train the general public on the availability of CPE information and services provided under the scope and obligations of this contract.	\$4,000
Office Supplies	Include paper, miscellaneous supplies, and copier supplies for one Information and Referral Specialist and to cover all supplies necessary to support requirements of this renewal.	\$200
Postage	Mail agency survey forms and update or request service information from agencies specifically meeting the needs of targeted population. Direct mail of publications to targeted population or callers.	\$250
Quick Guide Printing	To provide multiple copies of the Quick Guide to council and Contracting Agency Staff	\$762
In Kind	<i>Office space</i> - Space for full time staff person <i>Staff to assist in phone coverage</i> - Information and Referral staff assistance in phone coverage. <i>Training</i> - Information and Referral staff training. <i>MIS support</i> - Use of computer equipment, database resources, and MIS support of operation. <i>Office Equipment</i> - Office furniture, telephone, etc. <i>Staff Outreach</i> - Coordination of service delivery (Customer receives information on other program or service information ex. Cooling Assistance program). Information and Referral presentations to Central Points of Entry staff	\$0
Total		\$43,000

3.0 The Contractor shall invoice the Contracting Agency on a monthly basis. Each invoice shall be in the amount of \$3,583.34. Aggregate invoiced amount shall not exceed \$43,000.00.

Except as provided herein, all terms and conditions of Contract Number 720C-00610-98D00, as heretofore changed, remained unchanged and in full force and effect.

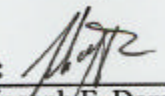
CONTRACTOR:

Date: 9/27/01

By: 
Sherri Brach
President
United Way Services

CONTRACTING AGENCY:

Date: 10/3/01

By: 
Joseph F. Damico
Director - OAS
DMHMRSAS

CONTRACT RENEWAL AGREEMENT

Date: April 17, 2002
Contract Number: 651A1991
Renewal Number: 1
Issued By: COMMONWEALTH OF VIRGINIA
Virginia Department Of Health
Office of Family Health Services

Contractor: United Way of Central Virginia
1010 Miller Park Square
Lynchburg, Va. 24501

Commodity: Provide information and referral services to people in the region and periodic reports to the Office of Family Health Services.

This Renewal Agreement is entered into pursuant to Section "Renewal of Agreement" of the contract. The Period of Performance is hereby extended from June 30, 2002 through June 30, 2003.

Except as provided herein, all terms and conditions of Contract Number # 651A1991 including any previous contract modifications, remain unchanged and in full force and effect.

(NAME OF CONTRACTOR)

By: Em A. Off
LIMITED WAY OF CENTRAL VIRGINIA
Type or Print Name

Title: President

Date: 4-29-02

540505923
(Federal ID or Social Security #)

VIRGINIA DEPARTMENT OF HEALTH

By: J. William Bullock
J. William Bullock
Type or Print Name

Title: Bullock

Date: 5/3/02

RECEIVED

JUN 18 2002

**VDSS OFFICE OF COMMUNICATIONS
AND PUBLIC RELATIONS**

LETTER OF AGREEMENT

Agreement # 651A1991

Cost Code 651A

BETWEEN: United Way of Central Virginia
1010 Miller Park Square
Lynchburg, Va. 24501

AND: Virginia Department of Health
Office of Family Health Services
PO Box 2448, Room 104
Richmond, Virginia 23218

PURPOSE: The purpose of this agreement is to secure an understanding between the Center and the Department of Health about the Center's duties regarding the provision of information and referral services to the maternal and child health population in its region, the provision of quarterly reports on the number of MCH calls to the Center and their percentage of the total calls to the Center, and the amount of compensation the Department will provide to the Center.

PERIOD OF PERFORMANCE: Performance will begin June 1, 2001, and continue through July 31, 2002.

SCOPE OF SERVICES:

- a. The Center's I&R staff will provide callers with information about providers of services that impact the health and well being of women of child bearing age, infants, children and adolescents during operating hours Monday through Friday, except on designated holidays. A recording device will be available for messages during all other times and will be followed up during the next business day.
- b. The Center will compile a quarterly report of (1) MCH calls it receives during each quarter, and (2) unmet needs in its service area within thirty (30) days after the end of each quarter of the state fiscal year. The Center will provide its report of MCH calls on the Problems/Needs Category Statistics, Maternal and Child Health Report form. The report shall include the number of MCH calls, the total number of calls to the center, and the percent of MCH calls to total calls to the center by category. The unmet needs will be reported on the Unmet Needs Report form. Both reports are due on each of the following dates: Oct. 30, Jan. 30, April 30, and July 30. Also, at least quarterly the Center will conduct a telephone survey of ten percent (10%) of all maternal and child health calls that resulted in a referral and compile a summary of the findings. These findings are due on the same dates as the quarterly reports: Oct. 30, Jan. 30, April 30, and July 30. The survey will include questions on the availability of services, the appropriateness of the referral, the utilization of the services and the clients' satisfaction. Data also will be collected and reported on all requests that do not result in a referral due to lack of service in the geographic area. Changes in data reporting requirements, including the reporting of additional data, may be agreed upon in writing by both parties.

- c. The Center will collect and compile into one quarterly report known as the "Comprehensive Quarterly Report" the quarterly reports of all the MCH calls made during each quarter to each of the I&R centers in Virginia. The Center will take necessary steps to ensure that the most recent data from each I&R Center is included in each "Comprehensive Quarterly Report." Also, the Center will collect the quarterly Unmet Needs Report from each of the I&R centers. The Center will forward the "Comprehensive Quarterly Report" and the Unmet Needs Reports to the Department within forty-five (45) days after the end of each quarter of the state fiscal year. The Center will provide the comprehensive report of MCH calls on the Problems/Needs Category Statistics, Maternal and Child Health Report form. The report shall include the number of MCH calls made to each of Virginia's I&R centers, the total number of calls made to each of Virginia's I&R centers, the percent of MCH calls by category and the total number of calls by quarter and year-to-date. The unmet needs will be reported on the Unmet Needs Report form. The Center further, will provide the Department with a report that compiles the quarterly referral surveys. This report will contain the total number of referrals by category of referral by region. All three reports are due on each of the following dates: Nov. 15, Feb. 15, May 15, and Aug. 15.
- d. Production of specialized service directories may be negotiated under separate agreements.
- e. Participate in an evaluation of the implementation of this agreement and the outcomes resulting from this agreement.
- f. Participate in an annual review of the list of MCH topics and the providers to whom callers are referred to ensure the completeness and correctness of the lists, and provide the Department with a list of providers for each topic by region.
- g. The Center will include in its service plan strategies specifically designed to inform those in the maternal and child population of the Center's services.
- h. The Center will allow the Virginia Department of Health to use the I&R toll-free phone number in its promotions as an avenue for citizens to obtain information about services in their area.

This Public Body does not discriminate against faith-based organizations in accordance with the Code of Virginia, Section 11-35.1 or against any bidder or offeror because of race, religion, color, sex, national origin, age disability, or any other basis prohibited by state law relating to discrimination in employment.

COMPENSATION: This Letter of Agreement shall not exceed \$5,000 per year.

(UNITED WAY OF CENTRAL VIRGINIA)

BY: E. Aft

Eric Aft,

President

11-12-01
(Date)

FIN/SS: 54-0505923

VIRGINIA DEPARTMENT OF HEALTH

BY: Janice Hicks

Janice Hicks,

Director, Policy & Assessment Unit

11/26/01
(Date)

METHOD OF PAYMENT: The Center shall be reimbursed on the basis of invoices submitted. Compensation shall not exceed \$5,000 per year. The Contractor shall invoice the Department \$1250 on a quarterly basis with supporting documentation. The Center will send its quarterly invoice to the Department with a letter stipulating the name of each I&R Center whose individual quarterly report data is included in the "Comprehensive Quarterly Report" and the date on which the Center received the data from each I&R Center. Billing shall be due no later than 30 days following the end of each quarter in which expenditures are incurred.

Invoices shall be submitted to:

Virginia Department of Health
Office of Family Health Services
ATTN: Charles Ford
PO Box 2448, Room 104
Richmond, Virginia 23218

Failure of the Contractor to submit invoices within the prescribed time frame may forfeit the Contractor's right to payment.

When providing the services specified under this Agreement, the Contractor shall not be deemed an "employee" or "agent" of the Virginia Department of Health. The Contractor shall act as an independent contractor and is responsible for obtaining and maintaining appropriate liability insurance, payment of all FICA, State and Federal taxes, and complying with other similar requirements, which are customary in the industry. In addition, the Contractor certifies that they are not an employee, nor do they currently employ employees of the Virginia Department of Health.

RENEWAL OF AGREEMENT: This Agreement may be renewed by the Commonwealth upon written agreement of both parties for three successive periods, under the terms of the current Agreement, and at a reasonable time (approximately 90 days) prior to expiration.

APPROPRIATIONS: The Contractor acknowledges its understanding that this Agreement is subject to appropriations by the State or by the Federal government.

INTEGRATION AND MODIFICATION: This Agreement constitutes the entire understanding of the parties as to the matters contained herein. No alteration, amendment or modification of this Agreement shall be effective unless in writing and signed by the duly authorized officials of both Department and Contractor.

LIABILITIES INSURANCE: The Virginia Department of Health acknowledges its understanding that for services performed by the Contractor pursuant to this Agreement, liability insurance is provided by Contractor.

CANCELLATION OF CONTRACT: The Department and the Contractor reserve the right to cancel and terminate any resulting agreement, in part or in whole, without penalty, upon thirty (30) days written notice. Any contract cancellation notice shall not relieve the Contractor of the obligation to deliver/perform on all outstanding services due prior to the effective date of the cancellation. Also, any contract cancellation notice shall not relieve the Department of the obligation to honor an invoice for services that was submitted in accordance with procedures outlined under the Method of Payment section of this Letter of Agreement.